

IN THE UNITED STATES COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION  
OPIATE LITIGATION MDL No. 2804  
Case No.  
17-mdl-2804  
Judge Dan Polster

This document relates to:  
The County of Cuyahoga, Ohio, et al., v.  
Purdue Pharma L.P., et al.,  
Case No. 1:17-OP-45004 (N.D. Ohio)

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Videotaped deposition of
WILLIAM DENIHAN
January 30, 2019
9:02 a.m.

Taken at:
Kelley & Ferraro LLP
950 Main Avenue
Cleveland, Ohio
Wendy L. Klauss, RPR

<p style="text-align: right;">Page 6</p> <p>1 CUYAH 012366210.....</p> <p>2 Exhibit 8 Designated Confidential, 174</p> <p>3 4/27/2010 Email, Subject:</p> <p>4 Several Things, with</p> <p>5 Attachment, Beginning with</p> <p>6 Bates Label CUYAH 012367618</p> <p>7 Exhibit 9 Designated Confidential, 177</p> <p>8 2/12/2007 Email, Forward:</p> <p>9 Executive Update, with</p> <p>10 Attachment, Beginning with</p> <p>11 Bates Label CUYAH 012875387</p> <p>12 Exhibit 10 Designated Confidential, 181</p> <p>13 1/17/2013 Email, Forward:</p> <p>14 Several Things/Updates, with</p> <p>15 Attachment, Beginning with</p> <p>16 Bates Label CUYAH 012549313</p> <p>17 Exhibit 11 Designated Confidential, 208</p> <p>18 September 2013 Email,</p> <p>19 Subject RE: September 12</p> <p>20 Testimony for Rep. Sprague</p> <p>21 Prescription Drug Addiction</p> <p>22 Legislative Study Committee,</p> <p>23 with Attachment, Beginning</p> <p>24 with Bates Label CUYAH</p> <p>25 12550626</p> <p>16 Exhibit 12 Designated Confidential, 223</p> <p>17 5/18/2017 Email, Subject:</p> <p>18 Cleveland Clinic May 19</p> <p>19 Denihan Remarks, with</p> <p>20 Attachment, Beginning with</p> <p>21 Bates Label CUYAH 012564935</p> <p>22 Exhibit 13 Designated Confidential, 234</p> <p>23 8/26/2014 Email, Subject:</p> <p>24 ADAMHS TV 20 Heroin</p> <p>25 Interview Q&A, Beginning</p> <p>with Bates Label CUYAH</p> <p>012397975</p> <p>23 Exhibit 14 Designated Confidential, 242</p> <p>24 8/31/16 Email, Subject:</p> <p>25 Overdose Report, with</p> <p>Attachment, Beginning with</p> <p>Bates Label CUYAH 012475366</p>	<p style="text-align: right;">Page 8</p> <p>1 INDEX OF VIDEO OBJECTION</p> <p>2 OBJECT PAGE</p> <p>3 objection..... 23</p> <p>4 objection..... 36</p> <p>5 objection..... 37</p> <p>6 objection..... 39</p> <p>7 objection..... 44</p> <p>8 objection..... 53</p> <p>9 objection..... 62</p> <p>10 objection..... 63</p> <p>11 objection..... 63</p> <p>12 objection..... 66</p> <p>13 objection..... 67</p> <p>14 objection..... 78</p> <p>15 objection..... 80</p> <p>16 objection..... 84</p> <p>17 objection..... 84</p> <p>18 objection..... 86</p> <p>19 objection..... 87</p> <p>20 objection..... 87</p> <p>21 objection..... 87</p> <p>22 objection..... 87</p> <p>23 objection..... 89</p> <p>24 objection..... 90</p> <p>25 objection..... 91</p>
<p style="text-align: right;">Page 7</p> <p>1 Exhibit 15 Designated Confidential, 247</p> <p>2 7/28/2017 Email, Subject:</p> <p>3 Matt Carroll Opioid Ask July</p> <p>4 28, 2017, with Attachment,</p> <p>5 Beginning with Bates Label</p> <p>6 CUYAH 012595362</p> <p>7 Exhibit 16 Ohio Prescription Drug Abuse . 252</p> <p>8 Task Force, Final Report,</p> <p>9 Task Force Recommendations,</p> <p>10 October 1, 2010, Beginning</p> <p>11 with Bates Label CUYAH</p> <p>12 000166378</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 9</p> <p>1 objection..... 91</p> <p>2 objection..... 92</p> <p>3 objection..... 93</p> <p>4 objection..... 94</p> <p>5 objection..... 94</p> <p>6 objection..... 98</p> <p>7 objection..... 98</p> <p>8 objection..... 98</p> <p>9 objection..... 98</p> <p>10 objection..... 98</p> <p>11 objection..... 99</p> <p>12 objection..... 100</p> <p>13 objection..... 101</p> <p>14 objection..... 101</p> <p>15 objection..... 101</p> <p>16 objection..... 102</p> <p>17 objection..... 110</p> <p>18 objection..... 111</p> <p>19 objection..... 113</p> <p>20 objection..... 118</p> <p>21 objection..... 123</p> <p>22 objection..... 126</p> <p>23 objection..... 127</p> <p>24 objection..... 127</p> <p>25 objection..... 127</p>

Page 10		Page 12	
1	objection..... 128	1	objection..... 222
2	objection..... 128	2	objection..... 223
3	objection..... 128	3	objection..... 224
4	objection..... 129	4	objection..... 225
5	objection..... 133	5	objection..... 226
6	objection..... 135	6	objection..... 226
7	objection..... 135	7	objection..... 232
8	objection..... 136	8	objection..... 233
9	objection..... 137	9	objection..... 233
10	objection..... 137	10	objection..... 233
11	objection..... 138	11	objection..... 233
12	objection..... 139	12	objection..... 234
13	objection..... 139	13	objection..... 234
14	objection..... 141	14	objection..... 238
15	objection..... 141	15	objection..... 239
16	objection..... 142	16	objection..... 240
17	objection..... 145	17	objection..... 240
18	objection..... 148	18	objection..... 240
19	objection..... 149	19	objection..... 240
20	objection..... 151	20	objection..... 241
21	objection..... 154	21	objection..... 242
22	objection..... 156	22	objection..... 244
23	objection..... 156	23	objection..... 246
24	objection..... 156	24	objection..... 250
25	objection..... 157	25	objection..... 250
Page 11		Page 13	
1	objection..... 157	1	objection..... 250
2	objection..... 157	2	objection..... 251
3	objection..... 157	3	objection..... 252
4	objection..... 169	4	objection..... 255
5	objection..... 177	5	objection..... 255
6	objection..... 181	6	objection..... 255
7	objection..... 186	7	objection..... 256
8	objection..... 193	8	objection..... 256
9	objection..... 195	9	objection..... 257
10	objection..... 200	10	objection..... 257
11	objection..... 203	11	objection..... 258
12	objection..... 203	12	objection..... 258
13	objection..... 203	13	objection..... 260
14	objection..... 204	14	objection..... 261
15	objection..... 206	15	objection..... 261
16	objection..... 206	16	objection..... 261
17	objection..... 207	17	objection..... 262
18	objection..... 207	18	objection..... 263
19	objection..... 208	19	objection..... 263
20	objection..... 213	20	objection..... 265
21	objection..... 213	21	objection..... 266
22	objection..... 214	22	objection..... 268
23	objection..... 214	23	objection..... 268
24	objection..... 215	24	objection..... 270
25	objection..... 221	25	objection..... 270

<p style="text-align: right;">Page 14</p> <p>1 THE VIDEOGRAPHER: We are on the 2 record at 9:02. Today's date is January 30, 3 2019. We are here in the matter of National 4 Prescription Opiate Litigation. This 5 deposition is taking place in Cleveland, Ohio. 6 Would counsel please identify 7 themselves for the record. 8 MS. SACKS: Shayna Sacks, for the 9 plaintiff, Cuyahoga County, and the witness. 10 MR. BOEHM: Paul Boehm, from 11 Williams & Connolly, for Cardinal Health, and 12 I'm joined by my colleague, William Hawkins. 13 MS. STEINMETZ: Jennifer Steinmetz, 14 from Tucker Ellis, on behalf of Johnson & 15 Johnson and Janssen Pharmaceuticals, Inc. 16 MS. FRANKLIN: Shirlethia Franklin, 17 Jones Day, on behalf of Walmart, Inc. 18 THE NOTARY: On the phone, please. 19 MR. ANDERSON: Jon Anderson, 20 Jackson Kelly, on behalf of AmerisourceBergen. 21 MS. CAIN-MANNIX: This is Moira 22 Cain-Mannix, from Marcus & Shapira, on behalf 23 HBC Service Company. 24 MR. ZIPP: This is John Zipp of 25 Covington & Burling, on behalf of McKesson.</p>	<p style="text-align: right;">Page 16</p> <p>1 of those depositions? 2 A. The positions I served in state 3 government and city government were -- in some 4 cases they were products, where two companies 5 wanted the contract and there was a dispute. 6 Other cases, they were personnel matters. 7 Q. When is the last time that you gave 8 sworn testimony in a deposition? 9 A. That I recall was I served as the 10 safety director for Cleveland, and it had to do 11 with personnel matters. That was in the mid 12 1990s. 13 Q. So the last time you gave a 14 deposition was in the mid 1990s or so? 15 A. Uh-huh, that I recall. 16 Q. I'm sure that Ms. Sacks has given 17 you a reminder or a refresher about how the 18 deposition will work today, but for the record, 19 let me just go through a few basic ground rules 20 that we try and follow to make sure that this 21 is as orderly as possible. 22 First of all, it is important that 23 you and I take turns talking, and what I mean 24 by that is I will try and wait until you are 25 completely done with your answer before I ask</p>
<p style="text-align: right;">Page 15</p> <p>1 MR. HOUSTON: This is Zeno Houston, 2 from Arnold & Porter, on behalf of the Endo and 3 Par defendants. 4 WILLIAM DENIHAN, of lawful age, 5 called for examination, as provided by the 6 Statute, being by me first duly sworn, as 7 hereinafter certified, deposed and said as 8 follows: 9 EXAMINATION OF WILLIAM DENIHAN 10 BY MR. BOEHM: 11 Q. Good morning, Mr. Denihan. 12 A. Good morning. 13 Q. We introduced ourselves before we 14 went onto the record, but for the record, my 15 name is Paul Boehm, I'm representing one of the 16 defendants in this lawsuit, and I'm going to 17 ask you some questions today. Thank you for 18 being here. 19 Have you ever been deposed before 20 today? 21 A. Yes. 22 Q. How many times have you been 23 deposed? 24 A. Probably a dozen. 25 Q. Can you describe the circumstances</p>	<p style="text-align: right;">Page 17</p> <p>1 my next question, and you will want to wait 2 until I'm done with my question before you 3 start to answer. Even if you have an idea of 4 where I'm going, it's important that you wait 5 until I'm all the way done. And that's so that 6 the record is clear, and it also helps the 7 court reporter here, who, as you know, is 8 writing down what we say; does that make sense? 9 A. It makes a lot of sense. 10 Q. We probably will not be perfect in 11 that respect today, and the court reporter will 12 remind us if we start to talk at the same time, 13 but let's just do our very best, fair? 14 A. Fair enough. 15 Q. And you've reminded me of one other 16 ground rule -- 17 A. Right. 18 Q. -- and that is in our normal way of 19 talking, if you give me a nonverbal signal, nod 20 your head or shake your head, I would know what 21 you mean. Because this is being written down, 22 it's important that you have to -- you speak 23 your answer. So if the answer is yes, you 24 can't just nod your head, you have to also say 25 yes. Make sense?</p>

<p style="text-align: right;">Page 18</p> <p>1 A. Understood.</p> <p>2 Q. It may be that Ms. Sacks will say,</p> <p>3 "Objection to form," to some of my questions</p> <p>4 today, and she might do that because she wishes</p> <p>5 to preserve an objection to a question that</p> <p>6 would be decided later by a judge.</p> <p>7 Do you understand that even if Ms.</p> <p>8 Sacks lodges an objection, you should go ahead</p> <p>9 and still answer the question?</p> <p>10 A. I don't understand that.</p> <p>11 Q. Okay. That's how it will work. So</p> <p>12 if I ask a question, Ms. Sacks says, "Objection</p> <p>13 to form," you should still go ahead and answer</p> <p>14 the question. She is objecting to preserve</p> <p>15 that issue for a later time. Make sense?</p> <p>16 A. Okay.</p> <p>17 Q. If you do not understand a question</p> <p>18 today, will you let me know that?</p> <p>19 A. Yes, sir.</p> <p>20 Q. Is there any reason today why you</p> <p>21 are not able to testify truthfully and</p> <p>22 completely?</p> <p>23 A. No.</p> <p>24 Q. You are not under any medications</p> <p>25 that would impinge on your memory or your</p>	<p style="text-align: right;">Page 20</p> <p>1 allegations made in the lawsuit?</p> <p>2 A. I don't know if I do or not.</p> <p>3 Q. Have you read the lawsuit?</p> <p>4 A. No, I haven't.</p> <p>5 Q. As I understand it, you were the</p> <p>6 head of the Cuyahoga County ADAMHS Board for</p> <p>7 many years; is that right?</p> <p>8 A. That's correct.</p> <p>9 Q. And just for the record, for those</p> <p>10 who may not be familiar with an ADAMHS Board,</p> <p>11 can you tell us what the acronym "ADAMHS"</p> <p>12 stands for, and describe a bit about the duties</p> <p>13 and responsibilities of the board itself in the</p> <p>14 community?</p> <p>15 A. The ADAMHS Board is the Alcohol,</p> <p>16 Drug Addiction and Mental Health Board for</p> <p>17 Cuyahoga County. Our role is to receive</p> <p>18 funding from the state and other places, such</p> <p>19 as the county, and distribute that funding to</p> <p>20 providers to provide services to individuals</p> <p>21 that have either mental illness and/or</p> <p>22 addiction.</p> <p>23 Q. Is it fair to say that the ADAMHS</p> <p>24 Board services involve all forms of</p> <p>25 substance-use disorders, in other words, all</p>
<p style="text-align: right;">Page 19</p> <p>1 ability to be truthful; is that right?</p> <p>2 A. That's correct.</p> <p>3 Q. What is your understanding about</p> <p>4 why you have been asked to give a deposition</p> <p>5 here today?</p> <p>6 A. My understanding is that for the</p> <p>7 position I held with the ADAMHS Board, that it</p> <p>8 was in the field of recovery, where people with</p> <p>9 addictions, that a case had been brought by the</p> <p>10 county and other places against those that made</p> <p>11 opiate pills, and that that and in its entity</p> <p>12 is why I was asked to come here, I understand.</p> <p>13 Q. Is it fair to say that your</p> <p>14 understanding for why you have been asked to</p> <p>15 give deposition testimony today is because of</p> <p>16 your role as the former CEO of the Cuyahoga</p> <p>17 County ADAMHS Board?</p> <p>18 A. Yes.</p> <p>19 Q. And are you aware that you were</p> <p>20 identified by lawyers in this case as somebody</p> <p>21 who has knowledge and information related to</p> <p>22 the allegations that are made in this lawsuit?</p> <p>23 A. No, I wasn't aware of that.</p> <p>24 Q. Do you believe that you do have</p> <p>25 information and knowledge related to the</p>	<p style="text-align: right;">Page 21</p> <p>1 forms of addiction?</p> <p>2 A. Yes, it's fair to say.</p> <p>3 Q. That would include alcohol?</p> <p>4 A. Yes, it would.</p> <p>5 Q. Would that include addiction to</p> <p>6 methamphetamines?</p> <p>7 A. Yes.</p> <p>8 Q. Cocaine?</p> <p>9 A. Yes.</p> <p>10 Q. Heroin?</p> <p>11 A. Yes.</p> <p>12 Q. And other substances?</p> <p>13 A. Yes.</p> <p>14 Q. You also indicated the ADAMHS Board</p> <p>15 has responsibilities in connection with</p> <p>16 services for people suffering from mental</p> <p>17 health disorders; is that right?</p> <p>18 A. That's correct.</p> <p>19 Q. How did it come to be that the</p> <p>20 ADAMHS Board has responsibility both for</p> <p>21 addiction treatment services and for mental</p> <p>22 health services?</p> <p>23 A. Prior to the ADAMHS Board, which</p> <p>24 became effective July 1, 1990 -- excuse me --</p> <p>25 2009, there with two boards: the mental health</p>

<p style="text-align: right;">Page 22</p> <p>1 board and the alcohol and drug, both by itself. 2 And the state gave the opportunity 3 for counties to bring both these boards 4 together, since they are both considered the 5 same, behavioral health, affecting the same 6 parts of the body and the brain, and thought of 7 in the same social services of behavioral 8 health. 9 So the county ordered both boards 10 to dissolve on June 30 of 2008 -- excuse me -- 11 2009, and form a board on July 1 of 2009, and 12 that was the beginning of the ADAMHS Board. 13 Q. Were you employed by the ADAMHS 14 Board in 2009? 15 A. Yes. 16 Q. Had you previously been affiliated 17 with one of the two pre-existing boards? 18 A. Yes. 19 Q. Which one? 20 A. Mental health board. 21 Q. For how long were you employed by 22 the mental health board for Cuyahoga County? 23 A. From July of 2002 to June 30 of 24 2009. 25 Q. On July 1, 2009, when the two</p>	<p style="text-align: right;">Page 24</p> <p>1 Q. Mr. Denihan, did you do anything to 2 prepare for the deposition that you are giving 3 here today? 4 A. Other than meet with Ms. Sacks. 5 Q. You met with Ms. Sacks? 6 A. Yes, I do now. 7 Q. When did you meet with Ms. Sacks? 8 A. Yesterday. 9 Q. For how long did you meet? 10 A. Most of the day. 11 Q. Other than the meeting that you had 12 for most of the day yesterday with Ms. Sacks, 13 have you had any other meetings with attorneys 14 or others to prepare for your deposition? 15 A. No. 16 Q. Did anybody other than Ms. Sacks 17 attend the meeting that you participated in 18 yesterday? 19 A. No. 20 Q. Have you reviewed any documents in 21 preparation for your deposition here today? 22 A. Yes. 23 Q. What documents have you reviewed? 24 A. I can't remember them, but they 25 were documents that Ms. Sacks had.</p>
<p style="text-align: right;">Page 23</p> <p>1 pre-existing boards formed to become one, 2 namely the ADAMHS Board, who became the CEO of 3 the newly formed board? 4 A. I did. 5 Q. Did you apply for that position? 6 A. Yes. 7 Q. Who made the decision to hire you 8 as the CEO of the newly formed ADAMHS Board in 9 July 2009? 10 A. A combination of both boards of 11 directors. 12 Q. For how long did you stay in the 13 position of CEO for the Cuyahoga County ADAMHS 14 Board? 15 A. Until August 1 of 2017. 16 Q. What have you done since August 17 2017? 18 MS. SACKS: Objection. Form. 19 A. Just a lot of different things. I 20 no longer work for the ADAMHS Board. I'm 21 retired. 22 Q. You retired? 23 A. Yeah. 24 Q. Did you retire in August of 2017? 25 A. Yes.</p>	<p style="text-align: right;">Page 25</p> <p>1 Q. Were there any documents that you 2 reviewed that refreshed your memory about 3 things that you might have forgotten until you 4 saw the documents? 5 A. I don't know if that's the purpose 6 I was to review them, but there were documents 7 that I was -- I had an association with on my 8 job. 9 Q. Are you able to recall any of the 10 documents that you looked at? 11 A. No. There were too many of them. 12 No. 13 Q. Okay. Fair enough. Have you read 14 any transcripts of depositions that other 15 people have given in connection with this 16 lawsuit? 17 A. No, I haven't. 18 Q. Have you ever had the opportunity 19 to read the written complaint that was 20 submitted in connection with this lawsuit? 21 A. No. 22 Q. Did you have any involvement in the 23 decision to bring this lawsuit? 24 A. No. 25 Q. Nobody ever consulted with you</p>

<p style="text-align: right;">Page 26</p> <p>1 about whether that was a good idea?</p> <p>2 A. No.</p> <p>3 Q. I would like to ask you some</p> <p>4 general background questions about your</p> <p>5 education and work history; does that sound</p> <p>6 okay?</p> <p>7 A. Sure.</p> <p>8 Q. I understand from some of the</p> <p>9 documents that were produced to us in this</p> <p>10 litigation that you studied at Cuyahoga</p> <p>11 Community College and then later at Cleveland</p> <p>12 State University; is that right?</p> <p>13 A. Yes.</p> <p>14 Q. And then it looks like you also</p> <p>15 took some graduate courses at Cleveland State</p> <p>16 University in the College of Urban Affairs; is</p> <p>17 that right?</p> <p>18 A. Yes.</p> <p>19 Q. Have you completed any graduate</p> <p>20 degrees?</p> <p>21 A. No.</p> <p>22 Q. Over the course of the day, we will</p> <p>23 be marking certain documents as exhibits to</p> <p>24 your deposition, and I'm going to mark the</p> <p>25 first of those right now. It will be Exhibit</p>	<p style="text-align: right;">Page 28</p> <p>1 and I wanted to direct your attention to that</p> <p>2 paragraph.</p> <p>3 It says, "Currently, Bill serves as</p> <p>4 the chief executive officer"; do you see that</p> <p>5 paragraph?</p> <p>6 A. Uh-huh.</p> <p>7 Q. So let me just read a little bit</p> <p>8 from that. "Currently, Bill serves as the</p> <p>9 chief executive officer for the Alcohol, Drug</p> <p>10 Addiction and Mental Health Services,"</p> <p>11 parentheses, "ADAMHS, Board of Cuyahoga County.</p> <p>12 He has also served as the CEO of the former</p> <p>13 Cuyahoga County Mental Health Board and as the</p> <p>14 executive director of the Cuyahoga County</p> <p>15 Department of Children and Family Services; do</p> <p>16 you see that?</p> <p>17 A. Uh-huh.</p> <p>18 Q. Is this the ADAMHS Board that we</p> <p>19 have been discussing so far this morning, that</p> <p>20 you have led since 2009?</p> <p>21 A. I don't understand the question.</p> <p>22 Q. This reference in your biography to</p> <p>23 the ADAMHS Board, is that the same entity that</p> <p>24 we have been discussing so far this morning,</p> <p>25 the Cuyahoga County ADAMHS Board?</p>
<p style="text-align: right;">Page 27</p> <p>1 1.</p> <p>2 - - - - -</p> <p>3 (Thereupon, Deposition Exhibit 1,</p> <p>4 Designated Confidential, Email with</p> <p>5 Attachment, Subject: Denihan's Bio</p> <p>6 and Resume, Beginning with Bates</p> <p>7 Label CUYAH 012702365, was marked</p> <p>8 for purposes of identification.)</p> <p>9 - - - - -</p> <p>10 Q. I'm going to hand you one copy of</p> <p>11 Exhibit 1 and I'm giving one copy to Ms. Sacks.</p> <p>12 I'll represent, as you can see,</p> <p>13 that this is a document produced to us in this</p> <p>14 litigation by the county. It was an email that</p> <p>15 has a brief biography about you, and then it</p> <p>16 has a resume, or a curriculum vitae that is</p> <p>17 yours; do you see that?</p> <p>18 A. Yes, I do.</p> <p>19 Q. Would you have been the author of</p> <p>20 these documents?</p> <p>21 A. Let me read them.</p> <p>22 Yes, I could have been the author.</p> <p>23 Q. Thank you. If you look in the</p> <p>24 third paragraph of the biography, there is</p> <p>25 reference to the ADAMHS Board in particular,</p>	<p style="text-align: right;">Page 29</p> <p>1 A. Yes, sir.</p> <p>2 Q. What were your duties and your</p> <p>3 responsibilities as the chief executive officer</p> <p>4 of the ADAMHS Board for Cuyahoga County?</p> <p>5 A. Duties and responsibilities were to</p> <p>6 oversee the activities of the ADAMHS Board, in</p> <p>7 the receiving of funding and the allocation and</p> <p>8 distribution of such funding for treatment</p> <p>9 services for those that had a mental illness</p> <p>10 and/or addiction problems, and to report to a</p> <p>11 volunteer, specifically appointed board on a</p> <p>12 regular basis those activities and the</p> <p>13 distribution of funding.</p> <p>14 Q. For what years were you the</p> <p>15 executive director of the Cuyahoga County</p> <p>16 Department of Children and Family Services?</p> <p>17 A. 1999, 2000 and 2001.</p> <p>18 Q. Were you the executive director of</p> <p>19 the Cuyahoga County Department of Children and</p> <p>20 Family Services at the same time you held any</p> <p>21 positions in connection with the mental health</p> <p>22 board?</p> <p>23 A. No.</p> <p>24 Q. Your biography also references that</p> <p>25 you were the highway state director -- I'm</p>

8 (Pages 26 - 29)

<p style="text-align: right;">Page 30</p> <p>1 sorry. I misspoke.</p> <p>2 Your biography references the fact</p> <p>3 that you served as highway safety director for</p> <p>4 the State of Ohio; is that right?</p> <p>5 A. Correct.</p> <p>6 Q. For what years did you do that?</p> <p>7 A. 1986 to 1989. Excuse me. I'm</p> <p>8 sorry. 1985.</p> <p>9 Q. 1985 to 1989?</p> <p>10 A. Yes.</p> <p>11 Q. You also spent some time as the</p> <p>12 Cleveland Public Safety Director; is that</p> <p>13 correct?</p> <p>14 A. Correct.</p> <p>15 Q. For what years did you do that?</p> <p>16 A. 1994 to 1999.</p> <p>17 Q. What were your duties as the</p> <p>18 Cleveland Public Safety Director?</p> <p>19 A. Director of public safety is to</p> <p>20 oversee all of the activities of the major</p> <p>21 divisions. There was a department of police,</p> <p>22 fire department, emergency medical services,</p> <p>23 the dog kennel and the workhouse.</p> <p>24 Q. What's the workhouse?</p> <p>25 A. The workhouse is where individuals</p>	<p style="text-align: right;">Page 32</p> <p>1 A. The first time it was 1996 and the</p> <p>2 second time was 1998. The first time it was</p> <p>3 six months, the second time it was exactly one</p> <p>4 week.</p> <p>5 Q. Your biography also indicates that</p> <p>6 you had been appointed by the governor of Ohio</p> <p>7 to the state alcohol and drug advisory board</p> <p>8 from 1996 to 2000?</p> <p>9 A. That's correct.</p> <p>10 Q. What were your responsibilities as</p> <p>11 a member of the state alcohol and drug advisory</p> <p>12 board?</p> <p>13 A. The advisory boards at that time</p> <p>14 was just looking at various state policies, of</p> <p>15 which I can't remember at this point. But it</p> <p>16 was more advisory than any other role.</p> <p>17 Q. Did your duties and</p> <p>18 responsibilities as a member of the state</p> <p>19 alcohol and drug advisory board have anything</p> <p>20 to do with drug abuse and addiction?</p> <p>21 A. I don't recall.</p> <p>22 Q. Your biography also indicates that</p> <p>23 you are the founder and first president of an</p> <p>24 entity named Cudell Improvement, Incorporated?</p> <p>25 A. Cudell.</p>
<p style="text-align: right;">Page 31</p> <p>1 would go to serve short periods of time from</p> <p>2 the municipal court system.</p> <p>3 Q. Your biography also indicates that</p> <p>4 you served as acting chief of police on two</p> <p>5 separate occasions?</p> <p>6 A. That's correct.</p> <p>7 Q. What were the circumstances of you</p> <p>8 serving as an acting police chief?</p> <p>9 A. The circumstances were that the</p> <p>10 chief was removed on both occasions, and the</p> <p>11 mayor wanted to have someone in there to</p> <p>12 provide some continuity relative to the</p> <p>13 programs we had going on.</p> <p>14 Since the chief reports to the</p> <p>15 safety director, that seemed to be a good role</p> <p>16 for him, so he demoted me twice to serve in the</p> <p>17 position. The public doesn't understand that,</p> <p>18 but that's what it was.</p> <p>19 Q. Did you maintain your</p> <p>20 responsibilities as the public safety director</p> <p>21 for Cleveland during the time that you were the</p> <p>22 acting chief of police?</p> <p>23 A. No, I couldn't.</p> <p>24 Q. In what years did you serve as</p> <p>25 acting chief of police?</p>	<p style="text-align: right;">Page 33</p> <p>1 Q. Cudell. Thank you. That's Cudell,</p> <p>2 that's C-U-D-E-L-L Improvement, Incorporated,</p> <p>3 correct?</p> <p>4 A. No. C-U-D-E-L-L.</p> <p>5 Q. Oh. That's what I meant to say.</p> <p>6 If I misspelled it, I apologize.</p> <p>7 A. That's okay.</p> <p>8 Q. What is Cudell Improvement,</p> <p>9 Incorporated?</p> <p>10 A. It's a local development</p> <p>11 corporation that was formed to deal with</p> <p>12 self-help within an entity and to deal with</p> <p>13 specific problems in a neighborhood. So</p> <p>14 generally that's what it was -- it is for.</p> <p>15 Q. Does Cudell Improvement,</p> <p>16 Incorporated still exist?</p> <p>17 A. Yes, it does.</p> <p>18 Q. Do you have any affiliation with</p> <p>19 that?</p> <p>20 A. No, I don't.</p> <p>21 Q. When did you cease having</p> <p>22 affiliation with Cudell Improvement,</p> <p>23 Incorporated?</p> <p>24 A. About six or seven years ago. I</p> <p>25 served on the board and decided that -- I had</p>

<p style="text-align: right;">Page 34</p> <p>1 moved to the Edgewater area and set up and 2 actually ran the Edgewater Homeowners 3 Association, and it was a conflict between two 4 organizations, so I resigned. 5 Q. What were the specific problems in 6 the neighborhood that the Cudell Improvement, 7 Incorporated entity addressed? 8 A. Barking dogs, stolen cars, 9 break-ins, muggings, some drugs, things of that 10 nature. 11 Q. When was Cudell Improvement, 12 Incorporated established? 13 A. 1973. 14 Q. In what respect or respects has the 15 Cudell Improvement, Incorporated addressed 16 problems related to drugs? 17 A. At that time, it was all new to us, 18 and there was kids at West Tech High School 19 were using drugs, and I really can't remember 20 too much about it, other than we were dealing 21 with the outcomes of them breaking into homes 22 and stealing things. 23 And my recollection is more of what 24 we were dealing with the police at the time and 25 getting them to do a better job on</p>	<p style="text-align: right;">Page 36</p> <p>1 abuse during the period of time that you were 2 the executive director of the Cuyahoga County 3 Children and Family Services? 4 A. I can't remember the exact 5 different substances used. All I recall is the 6 consequences that it had on children. 7 Q. Is it fair to say that alcohol 8 abuse has been a major contributor to problems 9 in the family that the Department of Children 10 and Family Services has had to address? 11 A. Yeah. Alcohol is also a drug, so, 12 yes. 13 Q. Has that always been the case, for 14 as long as you have been involved in county 15 government? 16 MS. SACKS: Objection. 17 A. Has what been the case? 18 Q. That alcohol abuse and addiction 19 has had a significant impact on families in the 20 community? 21 A. Yes. 22 Q. Are there any other substances that 23 come to mind as being particularly notable 24 during the time that you were a -- the 25 executive director of the Cuyahoga County</p>
<p style="text-align: right;">Page 35</p> <p>1 apprehension. 2 Q. At what time period are you 3 referring to right now, when you talk about the 4 time when -- 5 A. 70s. 40 years ago, 50 years. 6 Q. Do you know what substances were 7 primarily being abused at that time? 8 A. No, I don't. 9 Q. What were your duties as the 10 executive director of the Cuyahoga County 11 Department of Children and Family Services? 12 A. To oversee all the actions of 13 children at risk, dealing with foster care, 14 adoption and unruly children, and to ensure 15 that children who were brought into any type of 16 care were correctly treated. We were the 17 protector of children. 18 Q. To what extent did the abuse of 19 drugs or alcohol factor into the services that 20 you and others from the county Department of 21 Children and Family Services provide? 22 A. Well, drugs had a major 23 contribution to the destruction of the family 24 and harm against children. 25 Q. What were the primary substances of</p>	<p style="text-align: right;">Page 37</p> <p>1 Department of Children and Family Services that 2 you believe to be particularly problematic? 3 MS. SACKS: Objection. 4 A. There was a random number of drugs, 5 and I can't remember all the different names. 6 Meth, crack, heroin are some of the things that 7 came up. 8 Q. Your resume indicates that you were 9 a candidate for mayor for the City of Cleveland 10 in 2001; is that correct? 11 A. Uh-huh. Yes. 12 Q. Who were you running against in 13 election? 14 A. There were 15 people running. Jane 15 Campbell, who won; Tim McCormack, who was a 16 county commissioner; Jane Campbell was also a 17 county commissioner; Dan Brady, who was a state 18 rep; Rosemary Oakar was a congresswoman; John 19 Hurd, who was a state rep. I can't remember 20 everybody, but obviously somebody had to win. 21 It wasn't me. 22 Q. Well, that's a pretty good list. 23 Thank you. 24 Do you recall what your platform 25 was during that campaign? What were the issues</p>

<p style="text-align: right;">Page 38</p> <p>1 that you were most focused on when you decided 2 to run and when you ran for mayor of Cleveland? 3 A. Tough on issues, soft on people. 4 Q. And what do you mean by that? 5 A. That I knew how to deal with all 6 the issues, and that I had an ability to treat 7 people with respect and dignity and actually 8 get the most out of them. 9 Q. Were there any particular issues of 10 concern in the community at that time that were 11 primary issues in your platform? 12 A. Yes. 13 Q. What were those? 14 A. One was the potential lack of 15 funding in city government that would affect 16 the future, which ended up being true; the 17 deployment of police officers, in terms of 18 community policing. There is a lot -- there 19 was a lot of them, but those are two big ones. 20 Q. When you talk about the lack of 21 funding being a concern back in 2001, and then 22 that actually turning into a problem down the 23 road, can you tell us a little bit more about 24 what you mean by that? 25 A. We saw a forecast that there would</p>	<p style="text-align: right;">Page 40</p> <p>1 could give you an example. 2 Many times, especially with police 3 and fire, we get public grants in, which pay 4 for a police officer for two or three years, 5 entire salary and benefits. That comes due, 6 and when it comes due, they still have to be 7 paid, and that's an example. 8 The eroding tax base also. 9 Cleveland had a significantly eroding tax base. 10 Q. What was causing the eroding tax 11 base in the 2004, 2005 timeframe that required 12 the laying off of those police officers and 13 firefighters? 14 A. Cleveland, not unlike any other 15 major city in America, with the tax base 16 eroding, people moving out of the city, and 17 that's one of the largest things that happened 18 in America. 19 Q. Your resume also references that 20 you were associated with the Ohio Association 21 of County Behavioral Health Authorities and you 22 were on the executive committee for that 23 organization; is that right? 24 A. Yes. 25 Q. What is the Ohio Association of</p>
<p style="text-align: right;">Page 39</p> <p>1 be a shortfall of funding for the city in the 2 succeeding years after our new mayor took over, 3 and that actually happened. 4 And the new mayor had to lay off, 5 after the second year, 700 police officers and 6 300 firefighters, and it was a catastrophic 7 event, and she did not prepare for it, and she 8 lost the next race. 9 Q. That was Mayor Campbell? 10 A. Yes. 11 Q. Do you recall in what year Mayor 12 Campbell had to lay off 700 police officers and 13 300 firefighters? 14 A. It was 2003 or 4. I think 4. 15 Q. Why did she have to do that? 16 MS. SACKS: Objection. 17 A. Because of a -- at the time it was 18 a shortfall of funding that was predicted. 19 Q. When you talk about a shortfall of 20 funding for city funds, how does that happen, 21 what are the sources of funding that fell short 22 in 2004, 2005 that didn't allow -- or that 23 required the mayor to lay off 700 police 24 officers and 300 firefighters? 25 A. I can't remember exactly, but I</p>	<p style="text-align: right;">Page 41</p> <p>1 County Behavioral Health Authorities? 2 A. The State of Ohio has 50 boards 3 like ADAMHA in the 88 counties, and they have 4 an association, and its purpose is to track 5 bills in the general assembly and be a conduit 6 of information for the state government. 7 Q. Do I understand correctly that the 8 Ohio Association of County Behavioral Health 9 Authorities is an umbrella organization for the 10 counties' respective ADAMHS Boards? 11 A. It could be looked at that way, 12 yes. 13 Q. What were your responsibilities as 14 a member of the executive committee? 15 A. To be sensitive to major issues 16 coming down, and mostly inform the rest of the 17 membership, and seek advice and counsel from 18 the body. 19 Q. When you talk about the body, you 20 mean other members? 21 A. Yes, the other members. 22 Q. For what years were you on the 23 executive committee for the Ohio Association of 24 County and Behavioral Health Authorities? 25 A. I think every year I was on, except</p>

<p style="text-align: right;">Page 42</p> <p>1 for the last year.</p> <p>2 Q. Would that be from 2009 to 2016 or</p> <p>3 so?</p> <p>4 A. Yeah, yeah, yeah.</p> <p>5 Q. What are the sources of funding for</p> <p>6 the Cuyahoga County ADAMHS Board?</p> <p>7 A. The major source of funding is the</p> <p>8 county subsidy of -- I can't remember the exact</p> <p>9 numbers, but they seem to get the majority of</p> <p>10 the money, plus they got money from the state</p> <p>11 government, different government funds, plus</p> <p>12 they got some grants from the federal</p> <p>13 government and other nonprofit organizations.</p> <p>14 Q. Does Medicaid funding have any</p> <p>15 impact on the amount of money that ADAMHS has</p> <p>16 available?</p> <p>17 A. It did, until the state took over</p> <p>18 the distribution of the Medicaid. The county</p> <p>19 boards don't do that any more, but it does have</p> <p>20 an impact on the funding applications.</p> <p>21 Q. For those of us who are not</p> <p>22 familiar with the details of Medicaid and its</p> <p>23 impact on available resources for the ADAMHS</p> <p>24 Board, can you describe just a little bit more</p> <p>25 about how Medicaid funding plays into it and</p>	<p style="text-align: right;">Page 44</p> <p>1 the money directly to the providers.</p> <p>2 Q. What, was there a piece of</p> <p>3 legislation that passed in the Ohio General</p> <p>4 Assembly that caused that change, or was that</p> <p>5 changed caused by some other action?</p> <p>6 A. I think it was through</p> <p>7 administrative action. It didn't need</p> <p>8 legislative -- it didn't need to be passed</p> <p>9 through the general assembly.</p> <p>10 Q. Is that through the Ohio Department</p> <p>11 of Health?</p> <p>12 A. No. It's through the Ohio</p> <p>13 Department of Mental Health and Addiction.</p> <p>14 Q. Do you know the relative</p> <p>15 percentages as between the revenue sources for</p> <p>16 the ADAMHS Board from county dollars versus</p> <p>17 from state dollars versus from federal dollars</p> <p>18 versus private funds?</p> <p>19 MS. SACKS: Objection.</p> <p>20 A. I did, but I don't remember them</p> <p>21 anymore. I did, but I don't know what they are</p> <p>22 anymore. All the ones -- they fluctuate back</p> <p>23 and forth.</p> <p>24 Q. You indicated that the county</p> <p>25 provides some funding to the ADAMHS Board; is</p>
<p style="text-align: right;">Page 43</p> <p>1 describe the change that you are talking about?</p> <p>2 A. Well, previously Medicaid funding</p> <p>3 used to go directly to the board, then we would</p> <p>4 distribute to the providers. We no longer do</p> <p>5 that. The providers get their funding directly</p> <p>6 from Medicaid through the State of Ohio.</p> <p>7 So those who qualify for Medicaid,</p> <p>8 those that get funding for their services,</p> <p>9 whether it be in a hospital or other services,</p> <p>10 and Medicaid pays for it.</p> <p>11 Q. And you said that there was some</p> <p>12 change that took place.</p> <p>13 A. Yes. That change was about seven</p> <p>14 or eight years ago.</p> <p>15 Q. Was that with the passage of the</p> <p>16 Affordable Care Act?</p> <p>17 A. No. The Affordable Care Act came</p> <p>18 after that.</p> <p>19 Q. So what is the change that you are</p> <p>20 referring to and what caused that change?</p> <p>21 A. Well, there is one of two ways to</p> <p>22 do it: The state would give the money to the</p> <p>23 county, and the county would distribute the</p> <p>24 money and Medicaid, or the state would pay the</p> <p>25 money directly to the providers. Now they pay</p>	<p style="text-align: right;">Page 45</p> <p>1 that right?</p> <p>2 A. That's correct.</p> <p>3 Q. What is the source of the funding</p> <p>4 that the county provides to the ADAMHS Board?</p> <p>5 A. Through the county taxes.</p> <p>6 Q. Is it through the HHS levy?</p> <p>7 A. That is the major part of it, yes.</p> <p>8 Q. Talking now strictly about funds</p> <p>9 that the ADAMHS Board receives directly from</p> <p>10 the county, are there any other sources, other</p> <p>11 than the HHS levy, that is a source for ADAMHS</p> <p>12 Board funding from the county?</p> <p>13 A. Yes, there are. I don't remember</p> <p>14 what they are called. They are very small, as</p> <p>15 compared to the large health and human service</p> <p>16 funding.</p> <p>17 Q. Are you able in any way to describe</p> <p>18 these other non-HHS levy funding sources from</p> <p>19 the county?</p> <p>20 A. No.</p> <p>21 Q. You indicated they are very small?</p> <p>22 A. Yes.</p> <p>23 Q. Can you give us some sense of what</p> <p>24 you mean by that?</p> <p>25 A. Yeah. 10,000 as compared a</p>

<p style="text-align: right;">Page 46</p> <p>1 million, that's small.</p> <p>2 Q. During the time that you were the</p> <p>3 chief executive officer of the Cuyahoga County</p> <p>4 ADAMHS Board, did the ADAMHS Board ever make</p> <p>5 any expenditures that were directed</p> <p>6 specifically at trying to understand the</p> <p>7 contributing factors or causes of opioid abuse</p> <p>8 or overdose trends within the county?</p> <p>9 A. Would you repeat that question so I</p> <p>10 understand it better.</p> <p>11 Q. Sure. Let me do it one more time.</p> <p>12 A. Okay.</p> <p>13 Q. During the time that you were the</p> <p>14 chief executive officer for the Cuyahoga County</p> <p>15 ADAMHS Board, did the board ever make any</p> <p>16 expenditures that were directed specifically at</p> <p>17 trying to understand the contributing factors</p> <p>18 or the causes of opioid abuse or overdose</p> <p>19 trends within the community?</p> <p>20 A. I don't recall.</p> <p>21 Q. During the time that you were the</p> <p>22 chief executive officer of the Cuyahoga County</p> <p>23 ADAMHS Board, did the board ever make any</p> <p>24 expenditures that were specifically directed at</p> <p>25 mitigating or reducing levels of opioid abuse</p>	<p style="text-align: right;">Page 48</p> <p>1 Q. I just want to make sure I</p> <p>2 understand this correctly. Is it your</p> <p>3 recollection that prior to 2014, the Cuyahoga</p> <p>4 County ADAMHS Board never went to the county</p> <p>5 and requested funds specifically to address</p> <p>6 opioid abuse or overdose trends in the</p> <p>7 community?</p> <p>8 A. No, that's not what I'm saying.</p> <p>9 I'm saying that we did request</p> <p>10 additional funding, and I can recall back to</p> <p>11 14, 15, in that area, and some of it was for</p> <p>12 opiate abuse and some of it was for other</p> <p>13 things.</p> <p>14 Q. Do you recall prior -- well, let's</p> <p>15 talk specifically about any requests for</p> <p>16 expenditures that were related directly and</p> <p>17 specifically to opioid abuse, okay?</p> <p>18 Do you recall whether or not the</p> <p>19 Cuyahoga County ADAMHS Board ever went to the</p> <p>20 county government and requested funds</p> <p>21 specifically to address opioid abuse or</p> <p>22 overdose?</p> <p>23 A. Yes.</p> <p>24 Q. When is the first time that you</p> <p>25 recall the Cuyahoga County ADAMHS Board going</p>
<p style="text-align: right;">Page 47</p> <p>1 or overdose trends in the community?</p> <p>2 A. I don't think so, but I don't</p> <p>3 recall.</p> <p>4 Q. During the time that you were the</p> <p>5 chief executive officer of the Cuyahoga County</p> <p>6 ADAMHS Board, did the board ever make any</p> <p>7 specific requests to the county for any funds</p> <p>8 specifically to address opioid abuse or</p> <p>9 overdose in the community?</p> <p>10 A. Yes, in terms of more funding for</p> <p>11 treatment beds, things of that nature, because</p> <p>12 of the epidemic.</p> <p>13 Q. That's what I wanted to ask you</p> <p>14 about.</p> <p>15 A. Okay.</p> <p>16 Q. When did the Cuyahoga County ADAMHS</p> <p>17 Board go to the county and specifically request</p> <p>18 funds to address opioid abuse and overdose</p> <p>19 trends?</p> <p>20 A. I believe -- I don't recall the</p> <p>21 exact years, but I think it would be the last</p> <p>22 two or three years.</p> <p>23 Q. When you say, "Last two or three</p> <p>24 years," what do you mean by that?</p> <p>25 A. 14, 15, 16.</p>	<p style="text-align: right;">Page 49</p> <p>1 to the county to request funds to specifically</p> <p>2 address opioid abuse or overdose trends?</p> <p>3 A. I would say it's either 2014, 15 or</p> <p>4 16.</p> <p>5 Q. Do you recall what specific purpose</p> <p>6 the ADAMHS Board went to the county and made</p> <p>7 those requests for?</p> <p>8 A. The specific purpose was to provide</p> <p>9 funding for such things as beds.</p> <p>10 Q. For those who may not be as</p> <p>11 familiar with the treatment of substance-use</p> <p>12 disorders, what do you mean when you say</p> <p>13 funding for beds?</p> <p>14 A. Well, a person goes to the</p> <p>15 hospital. The hospital needs beds. Should</p> <p>16 they have the disease of mental illness or</p> <p>17 addiction, and because of the epidemic, the</p> <p>18 beds were becoming fewer and fewer, and the</p> <p>19 waiting period was becoming longer and longer,</p> <p>20 and we needed the beds for medically assisted</p> <p>21 treatment and beds for long-term sober</p> <p>22 recovery.</p> <p>23 So that was the general request</p> <p>24 that we made. I don't remember the exact</p> <p>25 numbers, but generally that's what it was for.</p>

<p style="text-align: right;">Page 50</p> <p>1 Q. Do you recall how much money the 2 ADAMHS Board requested from the county 3 specifically for the purpose of addressing 4 opioid abuse and overdose trends in the 5 community? 6 A. Not exactly. I can't remember 7 exactly, but it was more than what we received. 8 Q. You requested more than what you 9 received? 10 A. Yes. 11 Q. You anticipated my next question. 12 I was going to ask you whether or not your 13 request for those funds to the county was 14 honored? 15 A. Sometimes it was and sometimes it 16 wasn't. 17 Q. When you would make those requests 18 of the county, to whom would those requests be 19 made? 20 A. It would be made in -- the process 21 is to submit it to the county council, and who 22 would work with -- in concurrence with the 23 county administration, to see if they would 24 agree and/or disagree. 25 Q. When you talk about county</p>	<p style="text-align: right;">Page 52</p> <p>1 Q. Anybody else? 2 A. Well, it's kind of unfair to all 3 the other council, I just can't remember them, 4 and they all, from time to time. 5 Ms. Conwell made it a point of 6 coming to meetings and demonstrating a real 7 genuine interest in it, but I think all of 8 them, from time to time, shared an interest in 9 it, all of them. I would say all of them at 10 one time or another shared an interest in it. 11 Q. You indicated that in some 12 instances, requests for funding by the ADAMHS 13 Board to the county in relation to opioid abuse 14 were honored, and in other instances those 15 funds were not granted. 16 What is your understanding as to 17 what the factors were that determined whether 18 or not the county provided the funds you 19 requested to address opioid abuse? 20 A. That was not my area of expertise. 21 I don't know how they made their decisions or 22 why they did. So you have to ask them. 23 Q. Did you ever have any conversations 24 with them about the requests, why you wanted 25 the money, what you were going to use it for</p>
<p style="text-align: right;">Page 51</p> <p>1 administration, do you mean the county 2 executive's office. 3 A. Yes. 4 Q. Were there members of the county 5 council who were particularly involved in 6 budgeting decisions and specifically 7 ADAMHS-related budgeting? 8 A. Yes. 9 Q. Who were those individuals. 10 A. It was usually the council 11 president and the council finance chair. 12 Q. Can you give us names? 13 A. Sure. Council president was Dan 14 Brady and the county finance chair was Dale 15 Miller. 16 Q. Were there any members of the 17 Cuyahoga County Council who, in your view, had 18 a particular interest in understanding and 19 addressing opioid abuse, addiction and overdose 20 in the community? 21 A. Yes. 22 Q. Who were those individuals? 23 A. I can't remember them all, but one 24 of them I do remember was Yvonne Conwell. 25 That's one that I recall.</p>	<p style="text-align: right;">Page 53</p> <p>1 and so on? 2 A. Oh, yes. They wanted -- they all 3 asked for specifics as to why you wanted it, 4 why you needed it, and what it would go for. 5 So it is part of the procedure. 6 Q. Based on those conversations, did 7 you get a sense for the reasons why the county 8 council might agree or not agree -- 9 A. No. 10 Q. -- to the request that you made? 11 A. No. 12 Q. Who would we need to talk to to get 13 a better sense of that? 14 MS. SACKS: Objection. 15 A. My sense is the county council 16 themselves. 17 Q. Do you know Mr. Scott Osiecki? 18 A. Uh-huh. Yes. I'm sorry. 19 Q. That's okay. We've been doing a 20 pretty good job so far. 21 MR. BOEHM: Why don't we just go 22 off the record for a moment. 23 THE VIDEOGRAPHER: Off the record, 24 9:57. 25 (Recess taken.)</p>

<p style="text-align: right;">Page 54</p> <p>1 THE VIDEOGRAPHER: On the record,</p> <p>2 10:09.</p> <p>3 Q. Mr. Denihan, welcome back from our</p> <p>4 short break.</p> <p>5 I understand that there was</p> <p>6 something from your earlier testimony this</p> <p>7 morning that you wish to clarify.</p> <p>8 A. If you allow me to include that I</p> <p>9 finally did get a bachelor's degree at 61 at</p> <p>10 Cleveland State University, when I was 61 and</p> <p>11 the safety director for the City of Cleveland.</p> <p>12 The other part that I'm very proud</p> <p>13 of is I have a doctorate degree, honorary</p> <p>14 doctorate degree. I was awarded that two years</p> <p>15 ago from Cleveland State for public service.</p> <p>16 So I would like to have that added to it.</p> <p>17 Q. Great. Wonderful. Thank you and</p> <p>18 congratulations.</p> <p>19 A. Thank you.</p> <p>20 Q. I have seen your resume, and it is</p> <p>21 long and distinguished, so congratulations.</p> <p>22 - - - - -</p> <p>23 (Thereupon, Deposition Exhibit 2,</p> <p>24 Designated Confidential, 11/16/2012</p> <p>25 Email, Subject: Update on County</p>	<p style="text-align: right;">Page 56</p> <p>1 First of all, do you recall making</p> <p>2 the presentation in November 2012 to the county</p> <p>3 council that's referenced here?</p> <p>4 A. Vaguely.</p> <p>5 Q. Is that something that you</p> <p>6 regularly would do? In other words, would you,</p> <p>7 as chief executive officer of the ADAMHS Board,</p> <p>8 routinely make presentations related to the</p> <p>9 ADAMHS budget to the county council?</p> <p>10 A. Yes.</p> <p>11 Q. How often would you do that; was</p> <p>12 that on an annual basis?</p> <p>13 A. Mostly on an annual basis.</p> <p>14 Q. What was the purpose of those</p> <p>15 presentations you would make to the county</p> <p>16 council, in terms of the budget?</p> <p>17 A. A number of things. To defend and</p> <p>18 protect the stability of the budget, and to</p> <p>19 demonstrate a need for additional funding or a</p> <p>20 cutting of the funding or a program.</p> <p>21 Q. It appears from this email that in</p> <p>22 2012, you, on behalf the Cuyahoga County ADAMHS</p> <p>23 Board, requested a total of \$936,550 in</p> <p>24 additional funding for various different</p> <p>25 programs; do you see that?</p>
<p style="text-align: right;">Page 55</p> <p>1 Budget, with Attachment, Beginning</p> <p>2 with Bates Label CUYAH 012792797,</p> <p>3 was marked for purposes of</p> <p>4 identification.)</p> <p>5 - - - - -</p> <p>6 Q. I have marked the next document as</p> <p>7 an exhibit to the deposition. This is Exhibit</p> <p>8 2. I'll give you a moment to take a look at</p> <p>9 it, and while you are doing that, I'll just for</p> <p>10 the record indicate that this is an email from</p> <p>11 Mr. Scott Osiecki that attaches a county budget</p> <p>12 presentation made in November 2012 before the</p> <p>13 county council committee as a whole, and it</p> <p>14 appears from this document that you,</p> <p>15 Mr. Denihan, were the presenter of this</p> <p>16 presentation.</p> <p>17 Would you just let me know when you</p> <p>18 have had a chance to skim it.</p> <p>19 Have you had a chance to read the</p> <p>20 email?</p> <p>21 A. The email I have.</p> <p>22 Q. And I'm going to direct your</p> <p>23 attention to a couple of the slides, but before</p> <p>24 we do that, let me just ask you about the</p> <p>25 content of the email.</p>	<p style="text-align: right;">Page 57</p> <p>1 A. That's correct.</p> <p>2 Q. The first item on the list is</p> <p>3 something called Bridgeway; do you see that?</p> <p>4 A. Yes.</p> <p>5 Q. What is Bridgeway?</p> <p>6 A. Bridgeway is a provider. They went</p> <p>7 belly up and out of business. And these are</p> <p>8 additional expenses to pay for consumers that</p> <p>9 were living in properties owned by Bridgeway,</p> <p>10 and to continue their survival and life after</p> <p>11 Bridgeway. They would be homeless otherwise.</p> <p>12 So we were asking for that money to</p> <p>13 continue their housing and their treatment</p> <p>14 services.</p> <p>15 Q. What services did Bridgeway</p> <p>16 provide?</p> <p>17 A. Counseling services, mental illness</p> <p>18 counseling services, and also some drug</p> <p>19 addiction services.</p> <p>20 Q. Do you know roughly what percentage</p> <p>21 of services Bridgeway provided was mental</p> <p>22 health services versus substance abuse</p> <p>23 services?</p> <p>24 A. In this particular point in time,</p> <p>25 there were probably more mental health services</p>

<p style="text-align: right;">Page 58</p> <p>1 than substance abuse services. That's what</p> <p>2 Bridgeway focused on.</p> <p>3 Q. If I understand it correctly,</p> <p>4 ADAMHS Board was requesting \$591,550 in order</p> <p>5 to fund services that Bridgeway previously had</p> <p>6 been providing but could no longer provide,</p> <p>7 given that it had, as you put it, gone belly</p> <p>8 up; is that right?</p> <p>9 A. Uh-huh.</p> <p>10 Q. You have to --</p> <p>11 A. I'm sorry.</p> <p>12 Q. Is that correct?</p> <p>13 A. I'm sorry. I wasn't paying</p> <p>14 attention, as I should have. Would you repeat</p> <p>15 the question, please.</p> <p>16 Q. Absolutely. Sure.</p> <p>17 Tell me if I've got this correctly</p> <p>18 summarized: Is it true that the ADAMHS Board</p> <p>19 was requesting \$591,550 in order to fund the</p> <p>20 services that Bridgeway previously had been</p> <p>21 providing, but no longer could, because, as you</p> <p>22 put it, they went belly up?</p> <p>23 A. Yes.</p> <p>24 Q. Are you able to say --</p> <p>25 Your microphone, you might want</p>	<p style="text-align: right;">Page 60</p> <p>1 government, and the mental health board was one</p> <p>2 of those partners, and that there would be a</p> <p>3 cost to the team decisionmaking, and this was</p> <p>4 the cost for doing that.</p> <p>5 For foster care and adoption, all</p> <p>6 too often all the parties weren't at the table,</p> <p>7 especially if it was a mental health case, and</p> <p>8 we didn't have the mental health professional</p> <p>9 there, they would have to reschedule the case</p> <p>10 to get the mental health professional there,</p> <p>11 and that was wasting time and costing money,</p> <p>12 and that was what that was for.</p> <p>13 Q. What would the \$120,000 that was</p> <p>14 requested be used for specifically at the</p> <p>15 ADAMHS Board?</p> <p>16 A. The money was not for the ADAMHS</p> <p>17 Board. It was for the Department of Children</p> <p>18 and Family Services, for us to pay for</p> <p>19 counselors to go to these hearings.</p> <p>20 Q. The third item I think we can</p> <p>21 probably skip over. It refers to some mental</p> <p>22 health services at the community-based</p> <p>23 correctional facility. That doesn't have</p> <p>24 anything to do with substance abuse, correct?</p> <p>25 A. It could have, yes.</p>
<p style="text-align: right;">Page 59</p> <p>1 to --</p> <p>2 MR. BOEHM: Should he slide it up a</p> <p>3 little bit?</p> <p>4 THE VIDEOGRAPHER: Thank you.</p> <p>5 Q. Are you able to say how much of</p> <p>6 that \$591,550 would have been directed toward</p> <p>7 substance-use services, as opposed to mental</p> <p>8 health?</p> <p>9 A. No, I'm not able to do that.</p> <p>10 Q. Did the county council approve</p> <p>11 ADAMHS Board's request for \$591,550 related to</p> <p>12 Bridgeway expenses?</p> <p>13 A. I believe they did, but I can't</p> <p>14 totally recall to affirm they did.</p> <p>15 Q. The second item on the list is</p> <p>16 \$150,000 for team decisionmaking at DCFS; do</p> <p>17 you see that?</p> <p>18 A. Yes.</p> <p>19 Q. To what does that refer?</p> <p>20 A. The Department of Children and</p> <p>21 Family Services had a study completed, and one</p> <p>22 of the recommendations was to have team</p> <p>23 decisionmaking, and what it refers to is</p> <p>24 members of the team be from other departments</p> <p>25 within the organization, within county</p>	<p style="text-align: right;">Page 61</p> <p>1 Q. In what way?</p> <p>2 A. Well, so many times, actually the</p> <p>3 majority of the times, people had dual</p> <p>4 diagnosis, and many times the mental illness</p> <p>5 masked the substance abuse or vice versa, so</p> <p>6 which is one of the reasons we consolidated</p> <p>7 both.</p> <p>8 And the correction based --</p> <p>9 correction facility did not have funding for</p> <p>10 mental services at this location. The</p> <p>11 state -- for some reason, the state doesn't</p> <p>12 fund correctional facilities within the</p> <p>13 community, so we were recommending that this</p> <p>14 money go to that.</p> <p>15 Q. Is it correct that many individuals</p> <p>16 who have addiction have an underlying mental</p> <p>17 illness?</p> <p>18 A. I don't think you can say it that</p> <p>19 way you just said it. Could I correct you for</p> <p>20 a second?</p> <p>21 Q. Of course. Tell me how you would</p> <p>22 say it.</p> <p>23 A. That the majority of people -- a</p> <p>24 majority, not 90 percent, but closer to 60</p> <p>25 percent, have dual diagnosis, period.</p>

<p style="text-align: right;">Page 62</p> <p>1 Q. When you say dual diagnosis, you</p> <p>2 mean --</p> <p>3 A. Mental illness and addiction.</p> <p>4 Q. And when you say 60 percent, 60</p> <p>5 percent of what, of people who have a</p> <p>6 substance-use disorder?</p> <p>7 A. Yes.</p> <p>8 Q. So to sum it up, approximately 60</p> <p>9 percent of individuals who have a substance</p> <p>10 abuse disorder, also have some kind of mental</p> <p>11 health disorder?</p> <p>12 A. Yes.</p> <p>13 Q. Based on your work at the ADAMHS</p> <p>14 Board for all those years, do you have an</p> <p>15 understanding about what the relationship is</p> <p>16 and why that's true, that there is so commonly</p> <p>17 an underlying mental health disorder in</p> <p>18 individuals who have a substance-use disorder?</p> <p>19 MS. SACKS: Objection.</p> <p>20 A. I don't know that I could be there</p> <p>21 a hundred years and be able to understand that</p> <p>22 and give you a definite answer. I'm not a</p> <p>23 psychiatrist or a doctor. So I can't answer</p> <p>24 that.</p> <p>25 Q. Okay. Have you ever had</p>	<p style="text-align: right;">Page 64</p> <p>1 A. Yes, I do.</p> <p>2 Q. Why had the ADAMHS Board made this</p> <p>3 request in 2012?</p> <p>4 A. We made the request to increase</p> <p>5 public awareness of the consequences of</p> <p>6 becoming addicted, that it can kill you. And</p> <p>7 so we wanted to have -- propose a prevention</p> <p>8 campaign to do that, and that was the request.</p> <p>9 Q. Was there anybody at ADAMHS during</p> <p>10 the time that you were the chief executive</p> <p>11 officer who was particularly focused on opioid</p> <p>12 abuse and overdose issues?</p> <p>13 A. No. No.</p> <p>14 Q. The email here says that the</p> <p>15 purpose was to address an opiate/heroin</p> <p>16 epidemic, and you, in your testimony this</p> <p>17 morning, have referred to trends of opioid</p> <p>18 abuse and overdose as an epidemic.</p> <p>19 Can you describe why you have</p> <p>20 chosen to use the term "epidemic" and what your</p> <p>21 understanding is of what that term means in</p> <p>22 this context?</p> <p>23 A. I used that term in the beginning,</p> <p>24 recognizing I was one of the first ones to use</p> <p>25 that term, because I saw the difference of</p>
<p style="text-align: right;">Page 63</p> <p>1 communications with individuals in the mental</p> <p>2 health or substance-use disorder community here</p> <p>3 in the county on that subject?</p> <p>4 MS. SACKS: Objection.</p> <p>5 A. I'm sure we have had conversations</p> <p>6 on it, but I don't deny that we had</p> <p>7 conversations, period.</p> <p>8 Q. I guess I'm really just trying to</p> <p>9 understand if you have any understanding at all</p> <p>10 about why it is that so many individuals who</p> <p>11 have a substance abuse problem have mental</p> <p>12 health disorders?</p> <p>13 MS. SACKS: Objection.</p> <p>14 A. I just don't know.</p> <p>15 Q. The fourth item on the list here,</p> <p>16 going back to Exhibit 2, refers to a request</p> <p>17 for \$150,000 for a prevention campaign to</p> <p>18 address the opiate/heroin epidemic; do you see</p> <p>19 that?</p> <p>20 A. Yes, I do.</p> <p>21 Q. Do you recall making a request to</p> <p>22 the county council in 2012 on behalf of the</p> <p>23 Cuyahoga County ADAMHS Board for \$150,000 for a</p> <p>24 prevention campaign to address the</p> <p>25 opiate/heroin epidemic?</p>	<p style="text-align: right;">Page 65</p> <p>1 figures of fatalities early on.</p> <p>2 And, for example, the crack cocaine</p> <p>3 era, it went up to 50, down, up, and down to</p> <p>4 50. The heroin and the opiate didn't stop at</p> <p>5 50. I think it went to like 156 and then 212,</p> <p>6 and I thought that was the highest it was going</p> <p>7 to get.</p> <p>8 So that's why I used -- that's why</p> <p>9 I used that term. It just didn't increase, it</p> <p>10 exploded and -- period.</p> <p>11 Q. And when you talk about those</p> <p>12 figures, 50 and 212 and the other numbers, what</p> <p>13 are you referring to exactly?</p> <p>14 A. We kept -- there are figures that</p> <p>15 we kept, and I actually tracked through my</p> <p>16 career, through public safety, in terms of</p> <p>17 automobile crashes, drunk driving crashes --</p> <p>18 deaths rather, homicides and suicides, and I</p> <p>19 knew what those were for the last 20 years, 25</p> <p>20 years.</p> <p>21 And in Cuyahoga County, for</p> <p>22 example, homicides, suicides and automobile</p> <p>23 crashes hovered between 150 and 180 deaths a</p> <p>24 year, up and down for the last so many years.</p> <p>25 And down at the bottom were a</p>

<p style="text-align: right;">Page 66</p> <p>1 number of other diseases and illness, crack, 2 heroin, et cetera, and it was always very low, 3 at a low basis. And when the epidemic started, 4 it didn't go like this, it went like -- it 5 didn't go gradually up, on a stepladder, it 6 went almost straight up on the map. 7 That's why -- that's unusual. It 8 doesn't happen all the time, and I saw that was 9 extremely unusual, and that's why I reacted 10 that way. 11 Q. So those numbers that you are 12 referring to, are those in reference to 13 overdoses, overdose fatalities? 14 A. Yes. 15 Q. And here in November 2012, you are 16 referring to it as an epidemic. On what basis 17 had the county and the ADAMHS Board determined 18 that Cuyahoga County was experiencing an 19 opioid/heroin epidemic in or before 2012? 20 MS. SACKS: Objection. 21 A. The basis was that previous reports 22 were far lower than what the pattern had set 23 the year before and what we were experiencing 24 then. 25 Q. When in Cuyahoga did the trends of</p>	<p style="text-align: right;">Page 68</p> <p>1 A. Yes, at least then. 2 Q. Why do you refer to it as the -- in 3 this document it's referred -- let me start 4 that question over. 5 Going back to Exhibit 2, item 6 number 4, the request for these additional 7 funds is in relation to the opiate/heroin 8 epidemic. Why was it referred to as an 9 opiate/heroin epidemic? 10 A. I can't give you an answer today. 11 I don't know why. I believe this is all 12 beginning jargon for us at that time. So the 13 best I could tell you. 14 Q. Based on the years that you have 15 been involved in public safety in Cuyahoga 16 County, and the executive director of the 17 Department of Children and Family Services and 18 your other roles in county government, for how 19 long has addiction to heroin been something 20 that county government has had to deal with? 21 A. Oh, I think it has been there for a 22 long, long time. I don't think it's brand new. 23 I think for as long as I know of, it's been 24 around. Not with these numbers. 25 Q. You indicated that the \$150,000 for</p>
<p style="text-align: right;">Page 67</p> <p>1 opioid/heroin-related overdose fatalities start 2 to go up? 3 A. I think the trend started in 2012, 4 13, 14, that era, that time. 5 Q. Do you know when overdose 6 fatalities became the leading cause of 7 accidental death in Cuyahoga County? 8 A. When it exceeded motor vehicle 9 accidents at 212 and 215. And I can't remember 10 what year that was. 11 Q. If I understand you correctly, the 12 ADAMHS Board and you, as the chief executive 13 officer for the ADAMHS Board, tracked the 14 numbers of accidental deaths in the county and 15 the causes of those accidental deaths over the 16 years; is that correct? 17 MS. SACKS: Objection. 18 A. We track the accidental deaths as 19 best as we can, and we take the figures that's 20 given to us from the medical examiner's office. 21 Q. For how long has ADAMHS Board been 22 tracking the numbers of accidental deaths and 23 the causes of those deaths; has that been true 24 for as long as you have been the chief 25 executive officer?</p>	<p style="text-align: right;">Page 69</p> <p>1 the prevention campaign would, in part, be used 2 for building awareness? 3 A. Yes. 4 Q. Awareness about what? 5 A. Awareness, we tried to find out how 6 to reach the public, to let them know whatever 7 form of opiate or heroin they took, no matter 8 what it was, it could end up in death. So it 9 was a very short message and was specific to 10 let folks know this could kill you. 11 Q. Did the county council approve the 12 request for \$150,000 for a prevention campaign 13 to address the opioid and heroin epidemic -- 14 A. I can't remember-- 15 Q. I'm sorry. I just got to finish 16 the question. 17 A. I'm sorry. 18 Q. No, that's okay. Let me just say 19 it again. It's tricky. We will both make that 20 mistake. 21 Do you recall whether the county 22 council approved ADAMHS Board's request for 23 \$150,000 for this prevention campaign to 24 address the opiate/heroin epidemic in Cuyahoga 25 County?</p>

<p style="text-align: right;">Page 70</p> <p>1 A. I can't remember.</p> <p>2 Q. If you turn to the second page of</p> <p>3 the email, the fourth paragraph down says,</p> <p>4 "Councilman Michael Gallagher questioned the</p> <p>5 effectiveness of prevention and wanted</p> <p>6 Mr. Denihan to provide him with proof that the</p> <p>7 opiate prevention campaign would work before</p> <p>8 considering the request of \$150,000"; do you</p> <p>9 see that?</p> <p>10 A. Oh, yes.</p> <p>11 Q. Who is Councilman Michael</p> <p>12 Gallagher?</p> <p>13 A. Councilman Michael Gallagher is now</p> <p>14 state representative Michael Greenspan,</p> <p>15 representing the western suburbs of Cuyahoga</p> <p>16 County.</p> <p>17 Q. Greenspan or Gallagher?</p> <p>18 A. I'm sorry. I thought we were</p> <p>19 talking about Greenspan.</p> <p>20 Q. Greenspan is referenced in the</p> <p>21 paragraph above the one we just read.</p> <p>22 A. Oh, I'm sorry.</p> <p>23 Q. The one below it says Councilman</p> <p>24 Michael Gallagher is the one who questioned the</p> <p>25 effectiveness of prevention and wanted you to</p>	<p style="text-align: right;">Page 72</p> <p>1 I'll give you an example. On</p> <p>2 suicide presentation, to prove that we</p> <p>3 prevented suicide prevention is very difficult.</p> <p>4 However, every time we would spend,</p> <p>5 say, \$150,000, the next year suicide would go</p> <p>6 down 10 to 15 percent. We would not spend it</p> <p>7 the next year, it would go up the following</p> <p>8 year 10 to 15 percent. It would go up. That</p> <p>9 is the best example of proof we could get, and</p> <p>10 some folks do not appreciate that.</p> <p>11 So my experience has been, and</p> <p>12 relative to that comment, to prove prevention</p> <p>13 is very difficult, very, very difficult, and in</p> <p>14 this case we didn't.</p> <p>15 Q. In this case you did not provide</p> <p>16 proof?</p> <p>17 A. No, we couldn't. If we could have,</p> <p>18 it went down. It didn't go down, opiate went</p> <p>19 up.</p> <p>20 Q. Well, do you know if this awareness</p> <p>21 campaign or prevention campaign was ever put</p> <p>22 into effect?</p> <p>23 A. Yes, it was. A campaign was put</p> <p>24 into effect. That's why I said what I just</p> <p>25 said.</p>
<p style="text-align: right;">Page 71</p> <p>1 provide proof that the prevention campaign</p> <p>2 would work before considering the requested</p> <p>3 money; do you see that?</p> <p>4 A. Yes, I do.</p> <p>5 Q. Who is Councilman Michael</p> <p>6 Gallagher?</p> <p>7 A. He is a minority councilman.</p> <p>8 Q. What do you mean, "He is a minority</p> <p>9 councilman"?</p> <p>10 A. When you look at minority and</p> <p>11 majority, he is a Republican, with three</p> <p>12 Republicans and nine Democrats.</p> <p>13 Q. Is Michael Gallagher still a county</p> <p>14 councilman?</p> <p>15 A. Yes, he is.</p> <p>16 Q. What is your recollection about the</p> <p>17 request from Councilman Gallagher that you</p> <p>18 provide some proof that the awareness campaign</p> <p>19 would work?</p> <p>20 A. My experience has been it's very</p> <p>21 difficult, whether it is opiate or anything</p> <p>22 else, to provide any prevention campaign to</p> <p>23 work.</p> <p>24 Q. So provide proof?</p> <p>25 A. To provide proof that it's working.</p>	<p style="text-align: right;">Page 73</p> <p>1 Q. When was that campaign put into</p> <p>2 effect; was it in the 2012 timeframe?</p> <p>3 A. I think it was after that. I can't</p> <p>4 remember exactly when, but it was after that.</p> <p>5 Q. Can you remember a year?</p> <p>6 A. 13 or 14.</p> <p>7 Q. In the next paragraph down, it</p> <p>8 states, "Mr. Denihan explained that the board</p> <p>9 is an active partner in the Cuyahoga County</p> <p>10 Opiate Task Force, which both the sheriff and</p> <p>11 the medical examiner also participate"; do you</p> <p>12 see that?</p> <p>13 A. Yeah. Yes.</p> <p>14 Q. What is the Cuyahoga County Opiate</p> <p>15 Task Force?</p> <p>16 A. A collection of individuals that</p> <p>17 have a relationship with the county to serve on</p> <p>18 this task force.</p> <p>19 Q. In what way has the ADAMHS Board</p> <p>20 been a partner with the Cuyahoga County Opiate</p> <p>21 Task Force?</p> <p>22 A. Well, we were an active partner,</p> <p>23 active in the campaign. We went to meetings,</p> <p>24 and we went to meetings and had dialogue and</p> <p>25 communications.</p>

<p style="text-align: right;">Page 74</p> <p>1 Q. Were you one of the founders of the</p> <p>2 Cuyahoga County Opiate Task Force?</p> <p>3 A. I never thought of myself as a</p> <p>4 founder, but I was one of the original ones.</p> <p>5 Q. Were you one of the original</p> <p>6 members of the Cuyahoga County --</p> <p>7 A. I think I was, yes.</p> <p>8 Q. The question is: Were you one of</p> <p>9 the original members of the Cuyahoga County</p> <p>10 Opiate Task Force?</p> <p>11 A. I believe I was.</p> <p>12 Q. Do you recall that the Opiate Task</p> <p>13 Force for Cuyahoga County was established in</p> <p>14 2010?</p> <p>15 A. I don't remember the exact date it</p> <p>16 was established.</p> <p>17 Q. This statement here in the document</p> <p>18 we have marked as Exhibit 2 indicates that the</p> <p>19 sheriff and the medical examiner were also</p> <p>20 partners with the Cuyahoga County Opiate Task</p> <p>21 Force, correct?</p> <p>22 A. Correct.</p> <p>23 Q. Has the sheriff's department and</p> <p>24 the office of the medical examiner always been</p> <p>25 active partners for the Cuyahoga County Opiate</p>	<p style="text-align: right;">Page 76</p> <p>1 county?</p> <p>2 A. Uh-huh.</p> <p>3 Q. Would MetroHealth have been an</p> <p>4 active partner with the Cuyahoga County Opiate</p> <p>5 Task Force?</p> <p>6 A. Yes.</p> <p>7 Q. How about Cleveland Clinic?</p> <p>8 A. Yes.</p> <p>9 Q. What about University Hospitals?</p> <p>10 A. Yes.</p> <p>11 Q. What is your understanding about</p> <p>12 what the overarching purpose of the Cuyahoga</p> <p>13 County Opiate Task Force is and was?</p> <p>14 A. To save lives.</p> <p>15 Q. Can you just explain that a bit</p> <p>16 more?</p> <p>17 In what way did you understand that</p> <p>18 the purpose of the Cuyahoga County Opiate Task</p> <p>19 Force to be to save lives?</p> <p>20 A. Rarely can one entity be the answer</p> <p>21 to a large problem like this, and bringing all</p> <p>22 the forces together, just the act of</p> <p>23 communication with one another makes it</p> <p>24 stronger to enact public policy, public policy</p> <p>25 that needs to change or be accepted to deal</p>
<p style="text-align: right;">Page 75</p> <p>1 Task Force?</p> <p>2 A. To the best of my knowledge, yes.</p> <p>3 Q. The last sentence of that paragraph</p> <p>4 states that "Councilman Gallagher asked</p> <p>5 Mr. Denihan to make a presentation about the</p> <p>6 campaign and prove that prevention works during</p> <p>7 the council's public safety committee at</p> <p>8 a.m. on Tuesday, November 27"; do you see that?</p> <p>9 A. Yes, I do.</p> <p>10 Q. Do you recall whether or not you</p> <p>11 made such a presentation?</p> <p>12 A. I don't recall that we did.</p> <p>13 Q. Other than the ADAMHS Board, the</p> <p>14 sheriff, the medical examiner, what other</p> <p>15 active partners were involved in the Cuyahoga</p> <p>16 County Opiate Task Force?</p> <p>17 A. The county health director, the</p> <p>18 City of Cleveland Health Department, somebody</p> <p>19 from children and family services, the</p> <p>20 prosecutor's office, the federal assistant</p> <p>21 prosecutor, assistant attorney, various chiefs</p> <p>22 of police from different communities, highway</p> <p>23 patrol. Those are some of the ones I can</p> <p>24 remember -- and some various hospitals.</p> <p>25 Q. Those would be hospitals within the</p>	<p style="text-align: right;">Page 77</p> <p>1 with things that we were dealing with.</p> <p>2 We were dealing with something that</p> <p>3 is totally explosive, that we did not have the</p> <p>4 capacity to deal with. And by having a task</p> <p>5 force made us a stronger entity to come up with</p> <p>6 programs to deal with it, and many good</p> <p>7 programs came out of this.</p> <p>8 Q. You indicated earlier today that</p> <p>9 you believe yourself to be one of the first</p> <p>10 people to notice the worrisome trends of opioid</p> <p>11 abuse and overdoses and maybe one of the first</p> <p>12 people to use the term "epidemic" in connection</p> <p>13 with those trends.</p> <p>14 Do you recall when you first</p> <p>15 noticed those worrisome trends?</p> <p>16 A. Around this time, the time when I</p> <p>17 noticed that --</p> <p>18 Q. What time are you referring to?</p> <p>19 A. The time that -- this time right</p> <p>20 here, 2000- -- I guess it's 12. I didn't</p> <p>21 realize it was that early.</p> <p>22 When I start looking at the death</p> <p>23 rates going above 100, went to 156 or something</p> <p>24 like that, when they hovered in between 20 and</p> <p>25 40 for years, and then it went up to 212 or</p>

<p style="text-align: right;">Page 78</p> <p>1 something like that. That's when I noticed, 2 and that's when I used those terms. 3 Q. You don't recall exactly what year 4 that was in? 5 A. No, I don't recall. 6 Q. And by 2012, the county had already 7 established an Opiate Task Force, right? 8 A. That's correct. 9 Q. So these trends were recognized, 10 the worrisome trends in term of opioid abuse 11 and overdose were recognized by the county 12 sometime before 2012, correct? 13 MS. SACKS: Objection. 14 A. That's correct. 15 Q. I want to direct your attention to 16 one of the slides in particular that's attached 17 to this email. Unfortunately, these documents 18 are not numbered, so we are just going to have 19 to sort our way through it, but it is a slide 20 that's about six or seven in, and it looks like 21 this. It has a graph. 22 MS. SACKS: 805 Bates number? 23 MR. BOEHM: Yes. 24 MS. SACKS: Remember I told you 25 about the numbers in the corner? So look for</p>	<p style="text-align: right;">Page 80</p> <p>1 A. Yep, I do. 2 Q. Can you explain what this chart is 3 designed to demonstrate? 4 MS. SACKS: Objection. 5 A. I believe it's at a point in time, 6 in terms of population versus funding. 7 Q. Was the point of this particular 8 slide that you were using in your presentation 9 to the Cuyahoga County Council to show that the 10 amount of spending by the Cuyahoga County 11 ADAMHS Board was low, relative to the 12 population of the county, as compared to 13 spending by ADAMHS Boards in other counties? 14 A. I don't know if that was a direct 15 purpose of it. I don't recall. 16 Q. Look at the bottom, the last 17 sentence. 18 A. Okay. I see it. 19 Q. The last two lines say, "The 20 Cuyahoga board is funded at the same level as 21 the Athens, Hocking, Vinton board, when 22 Cuyahoga has 11.9 times more people"; do you 23 see that? 24 A. Uh-huh. 25 Q. What is the point you were trying</p>
<p style="text-align: right;">Page 79</p> <p>1 805. 2 Q. There it is. 3 MS. SACKS: You passed it, yeah. 4 Q. One back. 5 Okay. We are, for the record, 6 looking at the page of Exhibit 2 that's stamped 7 Cuyahoga 012793805. It is a graph that 8 compares spending by the ADAMHS Board, or 9 revenue available to each ADAMHS Board on a 10 county-by-county basis; do you see that? 11 A. Yes. 12 Q. And it also shows each county's 13 population? 14 A. Yes. 15 Q. Cuyahoga County has the largest 16 population in the state? 17 A. I think it's second now to Franklin 18 County. 19 Q. But at this time, it appears that 20 Cuyahoga had a slightly larger population than 21 Franklin County? 22 A. Yes. 23 Q. And then on the right-hand side of 24 this schematic, do you see there are some 25 dollar figures?</p>	<p style="text-align: right;">Page 81</p> <p>1 to convey to the county council when you 2 presented this information? 3 A. I don't recall exactly why I said 4 that, other than the fact that I was looking to 5 try to get more money. 6 Q. Okay. It might help if we turn to 7 the next slide, which has another schematic. 8 I'll let you get there. 9 A. I'm sorry. I'm having a hard time 10 changing these pages. 11 Q. That's okay. 12 MS. SACKS: Do you want me to 13 change it? 14 THE WITNESS: Would you? 15 MS. SACKS: Yeah. 16 THE WITNESS: Thanks. 17 MS. SACKS: You're welcome. 18 Q. Okay. This schematic is titled 19 Allocated Amount Per Person in County Board 20 Population; do you see that? 21 A. Yes, I do. 22 Q. And Cuyahoga is the last county 23 that's listed, at the very end of the 24 schematic; do you see that? 25 A. Yes, I do.</p>

<p style="text-align: right;">Page 82</p> <p>1 Q. And it looks to me like the county</p> <p>2 ADAMHS Boards are organized by order of highest</p> <p>3 amount of spending per capita to lowest amount</p> <p>4 of spending per capita; is that right?</p> <p>5 A. Yep.</p> <p>6 Q. And what point were you trying to</p> <p>7 convey to the county council when you</p> <p>8 communicated to them that the Cuyahoga County</p> <p>9 ADAMHS Board had the least amount of spending</p> <p>10 per capita of any ADAMHS Board in the state?</p> <p>11 A. This is my recollection regarding</p> <p>12 the former chart. I was pointing out the State</p> <p>13 of Ohio was not providing enough funding to</p> <p>14 Cuyahoga County as compared to other counties.</p> <p>15 It was a state funding issue, and I was also</p> <p>16 asking the county for the advocacy on</p> <p>17 equalizing the funding in the 505 account, and</p> <p>18 I was showing them the disparity between all</p> <p>19 the other counties.</p> <p>20 Q. So do these charts that are on the</p> <p>21 pages that end with Bates numbers 3805 and 3806</p> <p>22 reflect only money that came from the State of</p> <p>23 Ohio and not any other sources of revenue?</p> <p>24 A. I think so. I think that's what it</p> <p>25 was. That's what we were trying to show.</p>	<p style="text-align: right;">Page 84</p> <p>1 to do what they want to do, and they are not</p> <p>2 going to make any changes, and that's just too</p> <p>3 bad. That's just the way it goes.</p> <p>4 Q. Was it your understanding that the</p> <p>5 state government, because it was in the control</p> <p>6 of the Republican Party, gave less funding to</p> <p>7 Democratic strongholds within the state?</p> <p>8 A. That's exactly what I'm saying.</p> <p>9 Q. Including with respect to spending</p> <p>10 on substance abuse disorders?</p> <p>11 MS. SACKS: Objection.</p> <p>12 A. Whatever. It doesn't really</p> <p>13 matter. I don't know if they zeroed in on</p> <p>14 substance abuse disorders.</p> <p>15 My point is that we were pointing</p> <p>16 out that the state funding level was</p> <p>17 inadequate, as it relates to 505 funding line</p> <p>18 and population of all the other counties. That</p> <p>19 was our point, and that's what this is about.</p> <p>20 Q. And you were sharing that</p> <p>21 information with the county council in hopes</p> <p>22 that they could provide money that would help</p> <p>23 fill in the gaps; is that right?</p> <p>24 MS. SACKS: Objection.</p> <p>25 A. My hope was twofold: One is that</p>
<p style="text-align: right;">Page 83</p> <p>1 MS. SACKS: There it is.</p> <p>2 THE WITNESS: Thank you.</p> <p>3 MS. SACKS: This one and this one.</p> <p>4 Q. Do you know why the State of Ohio</p> <p>5 gave money to Cuyahoga that was so much less</p> <p>6 per capita than it provided to ADAMHS Boards in</p> <p>7 other counties in the state?</p> <p>8 A. No, I do not. It is a</p> <p>9 source -- it's a sore point.</p> <p>10 Q. Did you ever go to the powers that</p> <p>11 be in state government and raise this point?</p> <p>12 A. Yes, I did.</p> <p>13 Q. And can you describe those</p> <p>14 conversations?</p> <p>15 A. Well, I went to the general</p> <p>16 assembly, I went to the Minority Caucus, to the</p> <p>17 Black Caucus, and finally somebody said to me,</p> <p>18 "Denihan, you're Democrat, you're from Cuyahoga</p> <p>19 County, you are not in charge anymore of the</p> <p>20 State of Ohio." That was the answer.</p> <p>21 Q. Did you interpret that to mean that</p> <p>22 because you were a Democrat --</p> <p>23 A. Cuyahoga County is Democratic,</p> <p>24 heavily Democratic, and the state government</p> <p>25 was run by the Republicans, and they're going</p>	<p style="text-align: right;">Page 85</p> <p>1 they could use whatever influence they could</p> <p>2 and the power structure in Columbus to bring</p> <p>3 equity to this, and also provide funding, as</p> <p>4 requested. But that's really what was behind</p> <p>5 here.</p> <p>6 Q. Got it. I'm going to have you turn</p> <p>7 ahead several pages. At some point the</p> <p>8 numbers -- the numbering of the slides starts</p> <p>9 to pick up again, and I'm going to have you</p> <p>10 look for a slide with the number 19 in the</p> <p>11 bottom right-hand corner. The Bates number</p> <p>12 ends with 3817. And if you would like, I'm</p> <p>13 happy to help you get there.</p> <p>14 A. Here.</p> <p>15 Q. Sure.</p> <p>16 A. I seem to be all thumbs. Thanks.</p> <p>17 Q. No problem. Happy to do it. Just</p> <p>18 let me know if you would like me to do that</p> <p>19 moving forward.</p> <p>20 This is slide 19 of this November</p> <p>21 2012 presentation you made to the county</p> <p>22 council. This slide is titled Opioid/Heroin</p> <p>23 Epidemic; do you see that?</p> <p>24 A. Yes.</p> <p>25 Q. The first bullet point here states</p>

<p style="text-align: right;">Page 86</p> <p>1 that, "Heroin is the most common drug present 2 in drug-related deaths"; do you see that? 3 A. Yes, I do. 4 Q. What is the difference between 5 heroin and a prescription opioid medication? 6 A. I believe the general understanding 7 is that heroin is on the streets and it's not 8 prescribed, not legal, it's illegal, and that 9 opiates as coming from a prescription, where it 10 is authorized. 11 Q. Is it your understanding that 12 prescription opioid medications are only 13 lawfully used under the direction and care of a 14 licensed physician? 15 MS. SACKS: Objection. 16 A. Sure. Yes. 17 Q. Is it your understanding that 18 prescription opioid medications require 19 approval by the United States Food and Drug 20 Administration? 21 A. Yes. 22 Q. Are you familiar at all with the 23 approval process by which the FDA reviews drug 24 applications and decides whether or not to 25 approve a drug?</p>	<p style="text-align: right;">Page 88</p> <p>1 is the most common drug present in drug-related 2 deaths, what is your understanding about what 3 that means? 4 A. It's by the medical examiner, and I 5 think you would have to ask him what he means. 6 Q. I understand. It looks like this 7 information came to you from the medical 8 examiner? 9 A. Yeah. 10 Q. And then you put it into your 11 report to the county council? 12 A. Right. 13 Q. What did you understand it to mean 14 when you put in this report information from 15 the medical examiner that heroin is the most 16 common drug present in drug-related deaths? 17 A. I think you just stated it, that it 18 is the most common of the drug-related deaths. 19 Q. Do you know in what year heroin 20 became the most common drug present in 21 drug-related deaths in Cuyahoga County? 22 A. I don't know the exact year, but it 23 was within this timeframe, within four to five 24 years. 25 Q. Within four to five years of 2012?</p>
<p style="text-align: right;">Page 87</p> <p>1 A. No. 2 Q. How does heroin come into the 3 community, if it's an illegal substance? 4 MS. SACKS: Objection. 5 A. I don't know. I wish I knew. I 6 don't know. 7 Q. Is that something you have ever 8 tried to understand better in your role as CEO 9 of the Cuyahoga ADAMHS Board and in connection 10 with your work on the Cuyahoga County Opiate 11 Task Force? 12 MS. SACKS: Objection. 13 A. Not really. I spend my time trying 14 to deal with those that have the disease of 15 addiction as a result of heroin. 16 Q. Do you know whether or not drug 17 cartels have been active in Cuyahoga County? 18 MS. SACKS: Objection. 19 A. I don't know. 20 Q. Does Cuyahoga County have drug 21 dealers? 22 MS. SACKS: Objection. 23 A. I'm told they do. 24 Q. On this particular slide that we 25 are looking at now, where it says that heroin</p>	<p style="text-align: right;">Page 89</p> <p>1 A. Well, it's in the time period. 2 Q. Around 2012? 3 A. Yeah. 4 Q. When you and others in Cuyahoga 5 County recognized that there were worrisome 6 trends in terms of the level of opioid abuse 7 and overdose fatalities, did you, either you 8 personally or people you were working with on 9 the task force or at ADAMHS Board, undertake to 10 investigate the causes of those trends? 11 A. I wish I could tell you I had, but 12 my time was taken up trying to deal with the 13 ramifications of what was happening. 14 Q. Do you agree that it is important 15 to understand the causes of an epidemic in 16 order to be able to address it? 17 MS. SACKS: Objection. 18 A. Well, I don't know if I agree with 19 that. All I know is my responsibility was 20 trying to find beds for the people that were 21 getting it and deal more effectively with those 22 that wanted treatment. 23 So that's what we were doing, 24 that's what we were caught up with, that's what 25 we spent our time with.</p>

<p style="text-align: right;">Page 90</p> <p>1 Q. Understood. My question is a 2 little different than that for now. I do want 3 to ask you more about that part of it. 4 My question right now is whether 5 you agree that in order to be able to 6 effectively respond to any public health 7 crisis, it is important to understand the cause 8 or causes of that crisis? 9 MS. SACKS: Objection. 10 A. I think it would be nice to know 11 that, I think that would be good, but that 12 wasn't my job. 13 Q. Whose job was it, on the task 14 force, at ADAMHS Board, or otherwise in county 15 government, to try and understand the cause or 16 contributing factors to these worrisome trends 17 in opioid abuse or overdoses that you have 18 described? 19 A. I don't know. I don't know. 20 Q. Do you know if anybody ever 21 undertook, within the county, to try and 22 understand the causes or contributing factors 23 to this public health crisis? 24 A. I don't know. 25 Q. Have you ever heard of fentanyl?</p>	<p style="text-align: right;">Page 92</p> <p>1 Q. Let me keep it more simple. You're 2 right, because they could come from various 3 sources. 4 There is legal fentanyl and then 5 there is something different, which is illegal 6 fentanyl, correct? 7 A. I would agree to that. 8 Q. And illegal fentanyl is not 9 something that's approved by the FDA? 10 A. Right. 11 Q. And illegal fentanyl is something 12 that, unfortunately, has been introduced into 13 substances, and that has resulted in an 14 increase in overdose fatalities, correct? 15 MS. SACKS: Objection. 16 A. That's one of the causes, yes. 17 Q. Do you know the source of the 18 fentanyl that's being illegally used and 19 introduced into the drug market in Cuyahoga 20 County? 21 A. No, I don't. 22 Q. Have you ever heard it said, as 23 part of your responsibilities as chief 24 executive officer at the ADAMHS Board or as a 25 member of the Opiate Task Force, that the</p>
<p style="text-align: right;">Page 91</p> <p>1 A. Yes, I have. 2 Q. What is your understanding about 3 what fentanyl is? 4 A. It's a synthetic drug, legally used 5 to put people under for heart surgery. I guess 6 I had it when my open heart surgery. 7 Q. You yourself were administered 8 fentanyl? 9 A. I find out I did. I didn't even 10 know that that's what it was for, but I learned 11 that that's what it is legally for. A 12 synthetic drug, very strong. 13 Q. There are some forms of fentanyl 14 that are approved by the FDA for legitimate 15 medical uses, right? 16 A. That's what I understood. 17 MS. SACKS: Objection. 18 Q. And there are other forms of 19 fentanyl that are illegal, illegally made, and 20 then imported into our country, correct? 21 MS. SACKS: Objection. 22 A. I don't know -- I don't know if I 23 agree with you "imported into our country." 24 Q. Well, let me just -- 25 A. They use a laboratory.</p>	<p style="text-align: right;">Page 93</p> <p>1 fentanyl that was being introduced in Cuyahoga 2 County was illegally made? 3 A. I don't understand the question. 4 Q. It was bad. Let me start over. 5 A. Okay. 6 Q. It will not be my last bad question 7 today. 8 A. I hope I recognize it. 9 Q. Okay. Speaking now about the 10 fentanyl that's being used illegally and 11 introduced into substances that are resulting 12 in overdose fatalities in the county, have you 13 ever heard it said that that fentanyl is 14 illegally made? 15 A. Yes. 16 Q. Have you ever heard it said that 17 the fentanyl that's being used and introduced 18 into drugs in Cuyahoga County is illegally made 19 in places like China and Mexico? 20 MS. SACKS: Objection. 21 A. No. 22 Q. Have you ever heard of carfentanil? 23 A. Yes. 24 Q. What is your understanding about 25 what carfentanil is?</p>

<p style="text-align: right;">Page 94</p> <p>1 A. It's like a super effective, 2 demonstrative impact, it can bring down an 3 elephant. 4 Q. Carfentanil is not approved for use 5 in humans, correct? 6 A. Right. 7 Q. It's illegal, right? 8 MS. SACKS: Objection. 9 A. Right. 10 Q. Has carfentanil been illegally 11 introduced into the drug market in Cuyahoga 12 County? 13 MS. SACKS: Objection. 14 A. The answer to that lies in what the 15 medical examiner has found. Carfentanil has 16 been found, and some of the people have died 17 from it. 18 Q. Do you know the extent to which 19 illicit fentanyl and carfentanil have 20 contributed or caused overdose fatalities 21 within Cuyahoga County? 22 A. No, I don't. 23 Q. I want to direct your attention to 24 the final bullet point here on slide 19. It 25 say, "Pressure from dealers" -- well, actually,</p>	<p style="text-align: right;">Page 96</p> <p>1 A. I don't know where we got it at 2 that time, but that seemed to be the best 3 information that we had, and -- 4 Q. Would that have come from law 5 enforcement? 6 A. Pardon? 7 Q. Would that information, that drug 8 dealers were pressuring their clientele, for 9 lack of a better term, to switch from crack 10 cocaine to heroin, have come from law 11 enforcement officials within the county? 12 A. It could. It could come from a 13 whole number of issues. 14 Q. Where else might that have come 15 from, besides law enforcement? 16 A. It could come from the regular TV 17 screen. It could come from general releases by 18 other people in other parts of the state or the 19 country. 20 Q. What do you mean "TV screen," on 21 the news? 22 A. Yes, from the news. So I'm saying 23 to you that the information that we collected 24 wasn't just one source. It was a source of -- 25 it was many sources, and it was the putting</p>
<p style="text-align: right;">Page 95</p> <p>1 let's back up. 2 The top line bullet point is, 3 "Heroin use is increasing because"; do you see 4 that? 5 A. Uh-huh. 6 Q. And then the final sub-bullet point 7 reads, "Pressure from dealers to switch from 8 crack and prescription drugs to more 9 profitability heroin"; do you see that? 10 A. Uh-huh. 11 Q. Why did you say that there was 12 pressure being applied by drug dealers for 13 individuals to switch from crack to heroin? 14 A. I don't know why. I don't know 15 why. All I know is that this is in the 16 beginning, early stages of reacting to these 17 statements. 18 Q. Is it your understanding that drug 19 dealers in Cuyahoga County were pressuring 20 addicts to switch from crack cocaine to heroin? 21 A. That's not -- what we knew in 2012 22 is different than we know today, and I don't 23 know if I would agree with that today or not. 24 Q. Where did you get that information, 25 that --</p>	<p style="text-align: right;">Page 97</p> <p>1 together of that understanding at that moment 2 in time, and that's what we understood then, 3 and we look at it today, I could see why you 4 asked that question. 5 And so when you asked me why we did 6 it, I don't know, other than the fact that it's 7 the best knowledge that we had at that time. 8 Q. Do you have any information, 9 sitting here today, that indicates that the 10 statement that drug dealers in and around 2012 11 were pressuring addicts to switch from crack to 12 heroin was incorrect? 13 A. I don't know if it's incorrect, but 14 if a person's run out of prescription drug and 15 they want to continue, then they would progress 16 to the street. 17 Q. We'll get to that in a minute. 18 Right now I'm just asking you about this 19 statement. 20 Do you have any reason, sitting 21 here today, to believe that what you said in 22 2012 to the county council, that drug dealers 23 were pressuring addicts to switch from crack 24 cocaine to heroin, was incorrect? 25 A. No, I don't.</p>

25 (Pages 94 - 97)

<p style="text-align: right;">Page 98</p> <p>1 Q. You agree that individuals can 2 begin abusing heroin who already have a 3 pre-existing addiction to other substances, 4 correct?</p> <p>5 MS. SACKS: Objection.</p> <p>6 A. Would you clarify that?</p> <p>7 Q. Sure. Do you agree that 8 individuals who begin abusing heroin may 9 already have a pre-existing addiction to other 10 substances?</p> <p>11 MS. SACKS: Same objection.</p> <p>12 A. Well, they could. Sure they could.</p> <p>13 Q. And one example here that you 14 reference is crack. These are individuals who 15 would already be addicted to crack cocaine and 16 then might switch over to heroin, right?</p> <p>17 MS. SACKS: Objection.</p> <p>18 A. It could.</p> <p>19 Q. Do you agree that it is common for 20 individuals who have a substance-use disorder 21 to abuse more than one substance?</p> <p>22 MS. SACKS: Objection.</p> <p>23 A. It could.</p> <p>24 Q. Do you agree that it's common?</p> <p>25 MS. SACKS: Objection.</p>	<p style="text-align: right;">Page 100</p> <p>1 chief executive officer for the ADAMHS Board, 2 did you come to an understanding about the 3 frequency or the commonality of individuals who 4 suffer from a substance-use disorder having an 5 addiction to more than one substance?</p> <p>6 A. I don't know if I did that or not. 7 I don't think I did.</p> <p>8 Q. You agree that individuals can 9 begin abusing prescription opioid medications 10 who already have a pre-existing addiction to 11 another substance, correct?</p> <p>12 A. I agree that could happen.</p> <p>13 Q. Do you know the percentage of 14 individuals who began abusing prescription 15 opioid medications who already had a 16 pre-existing addiction to another substance?</p> <p>17 A. No, I don't.</p> <p>18 Q. Do you know the percentage of 19 individuals who abused prescription opioid 20 medication who developed their addiction to 21 opioids through the use of heroin?</p> <p>22 MS. SACKS: Objection.</p> <p>23 A. No, I don't.</p> <p>24 Q. Is that something you have ever 25 looked into?</p>
<p style="text-align: right;">Page 99</p> <p>1 A. I don't know.</p> <p>2 Q. What is your understanding about 3 whether or not it is common for somebody who 4 has a substance-use disorder to abuse more than 5 one substance?</p> <p>6 MS. SACKS: Objection.</p> <p>7 A. I don't know. And the reason I 8 don't know is that I only get those that are a 9 problem, and you just described what the 10 problem is. I don't get the full population. 11 So a person will come up and 12 say -- or we would find out that this is what 13 they have. Somebody would call and say, he or 14 she is using these three things, and we could 15 find out from a doc saying that, we could find 16 out from their family. 17 So I don't, all I -- I don't see 18 the whole population. I just see the 19 population that needs help, and that population 20 that needs help has multiple uses at times. I 21 don't know if it's common or not. What I do 22 know is the end result was a huge increase in 23 deaths in our county. That's what I know.</p> <p>24 Q. Let me just go back to my question, 25 and if you don't know, that's fine, but as the</p>	<p style="text-align: right;">Page 101</p> <p>1 A. No.</p> <p>2 MS. SACKS: Objection.</p> <p>3 Q. Do you agree that most individuals 4 who have begun abusing prescription opioid 5 medications in Cuyahoga County obtained the 6 pills illegally, not from a licensed doctor for 7 a legitimate medical need?</p> <p>8 MS. SACKS: Objection.</p> <p>9 A. Would you clarify that?</p> <p>10 Q. Sure. Do you agree that 11 individuals -- let me start over. 12 Do you agree that most individuals 13 who have developed -- I'll start again. Sorry. 14 A. That's okay.</p> <p>15 Q. I'm going to try to get this as 16 good as I can.</p> <p>17 A. That's all right.</p> <p>18 Q. Do you agree that most individuals 19 in Cuyahoga County who have begun abusing 20 prescription opioid medications obtained their 21 pills illegally, rather than through a licensed 22 physician for a legitimate medical need?</p> <p>23 MS. SACKS: Objection.</p> <p>24 A. No, I don't.</p> <p>25 Q. What is your understanding? Why do</p>

<p style="text-align: right;">Page 102</p> <p>1 you say that? What statistical information are</p> <p>2 you basing that on?</p> <p>3 A. I don't know.</p> <p>4 Q. You don't know?</p> <p>5 A. No.</p> <p>6 Q. You don't know what percentage of</p> <p>7 individuals in Cuyahoga County who have abused</p> <p>8 prescription opioid medications first obtained</p> <p>9 pills illegally; is that right?</p> <p>10 A. I don't know.</p> <p>11 Q. Is that something that the ADAMHS</p> <p>12 Board or the Cuyahoga County Opiate Task Force</p> <p>13 has ever looked into, as far as you know?</p> <p>14 MS. SACKS: Objection.</p> <p>15 A. I don't think so.</p> <p>16 Q. Would you just turn to the next</p> <p>17 page. I'll help you out, if you don't mind.</p> <p>18 A. No, I don't mind at all.</p> <p>19 Q. I'm just going to flip this over to</p> <p>20 the very next slide that was part of your</p> <p>21 presentation to the county council in 2012.</p> <p>22 This slide breaks down the request</p> <p>23 for \$150,000 for this awareness campaign you</p> <p>24 described and the purposes for the money,</p> <p>25 right?</p>	<p style="text-align: right;">Page 104</p> <p>1 any other instances when the ADAMHS Board went</p> <p>2 to the county council or county executive to</p> <p>3 request funding specifically to address opioid</p> <p>4 abuse, addiction and overdose?</p> <p>5 A. The only other request, if there</p> <p>6 were -- if there were -- would have been in the</p> <p>7 annual budgets presented for an increase in</p> <p>8 funding for beds and prevention, treatment and</p> <p>9 prevention.</p> <p>10 So the funding breaks down into one</p> <p>11 of two areas, treatment or prevention -- excuse</p> <p>12 me -- treatment, yeah, treatment or prevention.</p> <p>13 So if it happened, it happened in</p> <p>14 the annual budgets we submitted. These were</p> <p>15 other than the annual budget.</p> <p>16 Q. This was a specific request --</p> <p>17 A. Yes, yes, right.</p> <p>18 Q. -- right?</p> <p>19 You were going to the county</p> <p>20 council and saying, "We need some additional</p> <p>21 money"?</p> <p>22 A. So the question was had we done</p> <p>23 it --</p> <p>24 Q. Let me just finish my question.</p> <p>25 A. Yeah, finish your question.</p>
<p style="text-align: right;">Page 103</p> <p>1 A. Yes, it does.</p> <p>2 Q. It looks like there was a plan to</p> <p>3 rent some billboards, to put up some bus</p> <p>4 placards, and then to have some radio and</p> <p>5 internet advertisements, right?</p> <p>6 A. Uh-huh.</p> <p>7 Q. You have to say yes or no.</p> <p>8 A. Yes.</p> <p>9 Q. Setting aside this request for</p> <p>10 \$150,000 by the ADAMHS Board to the county</p> <p>11 council, do you recall any other instances</p> <p>12 where the ADAMHS Board went to the county</p> <p>13 council or the county executive and made</p> <p>14 requests for additional funds specifically for</p> <p>15 the purpose of addressing opioid abuse or</p> <p>16 overdose trends in the community?</p> <p>17 A. Yes.</p> <p>18 Q. What else do you recall in that</p> <p>19 respect?</p> <p>20 A. A request for funding, a couple</p> <p>21 years ago, for sober beds.</p> <p>22 Q. Okay. Any other requests? If you</p> <p>23 set aside for now the 150,000 requested in 2012</p> <p>24 and the request, from a couple years ago, for</p> <p>25 money to spend on sober beds, can you recall</p>	<p style="text-align: right;">Page 105</p> <p>1 Q. This was an occasion here in 2012</p> <p>2 where the ADAMHS Board specifically went to the</p> <p>3 county council and made a request for \$150,000</p> <p>4 that was specifically to address opioid abuse,</p> <p>5 addiction and overdose, right?</p> <p>6 A. Correct.</p> <p>7 Q. And then you indicated that a</p> <p>8 couple of years ago, there was a --</p> <p>9 A. You asked me if we had done</p> <p>10 something else, and I was pointing out the</p> <p>11 answer to that is yes, and it was for</p> <p>12 prevention for medically assisted treatment</p> <p>13 beds and sober beds.</p> <p>14 Q. That was a couple of years ago,</p> <p>15 correct?</p> <p>16 A. It was, I think, my last year</p> <p>17 there.</p> <p>18 Q. 2017?</p> <p>19 A. Yeah.</p> <p>20 Q. Can you recall any other instances</p> <p>21 where the ADAMHS Board went to the county</p> <p>22 council or county executive to specifically</p> <p>23 request funds to address trends of opioid</p> <p>24 abuse, addiction or overdose in the community?</p> <p>25 A. I think my answer is still the</p>

<p style="text-align: right;">Page 106</p> <p>1 same, that it would have been put in the annual 2 budget request. You have to make a request 3 every year for your annual budget. I don't 4 recall it other than what I told -- shared with 5 you on the beds, but other than to say it 6 could, for example -- and I can't even think of 7 an example. 8 If we did do it, it would have been 9 the annual budgets. 10 Q. Can you recall any instances other 11 than the two you have identified? 12 A. Well, I think one year we supported 13 the Dawn Program, the Narcan kits for 14 MetroHealth. 15 Q. The Dawn Program was funded by the 16 Ohio Department of Health, right? 17 A. They may have, but we were the 18 first one to fund them \$50,000. 19 Q. So my question to you again is: 20 Other than in 2012 when ADAMHS requested 21 150,000, and then in 2017 when ADAMHS requested 22 funding for sober beds and medically assisted 23 treatment related to opioids, are there any 24 other specific instances that you can recall 25 where ADAMHS went to the county council or</p>	<p style="text-align: right;">Page 108</p> <p>1 (Recess taken.) 2 - - - - - 3 (Thereupon, Deposition Exhibit 3, 4 Designated Confidential, The Center 5 for Health Affairs, ADAMHS Board 6 Needs Analysis, Beginning with Bates 7 Label CUYAH 012460111, was marked 8 for purposes of identification.) 9 - - - - - 10 THE VIDEOGRAPHER: On the record, 11 11:42. 12 Q. Welcome back from our short break, 13 Mr. Denihan. 14 A. Yes, sir. 15 Q. While we were off the hard, I 16 handed you a document that has been marked as 17 Exhibit 3 for the purpose of this deposition, 18 which is entitled ADAMHS Board Needs Analysis, 19 and the date is from November and December, 20 2016; do you see that? 21 A. Yes, I do. 22 Q. Do you recognize this document? 23 A. No. 24 Q. What is the Center For Health 25 Affairs?</p>
<p style="text-align: right;">Page 107</p> <p>1 county executive to request specific funds to 2 address opioid abuse, addiction or overdose? 3 A. I can't think of it, only to tell 4 you that we took discretionary funds, where we 5 didn't go to county council, and used it to pay 6 for other programs that would be used to deal 7 with opiates. 8 Q. Understood, and I'll ask about that 9 too, but right now I just want to -- I want to 10 stick with my question here and make sure I 11 understand it. 12 A. Oh, I think -- I can't remember if 13 there is any other. I can't remember. 14 Q. You do not recall, sitting here 15 today, any instances where the ADAMHS Board 16 went to the county council or county executive 17 to request funds specifically to address opioid 18 abuse, addiction or overdose, other than in 19 2012, when you requested \$150,000, and in 2017, 20 when you requested money for the sober beds; is 21 that correct? 22 A. That's correct. 23 MR. BOEHM: Go off the record. 24 THE VIDEOGRAPHER: Off the record. 25 11:24.</p>	<p style="text-align: right;">Page 109</p> <p>1 A. The Center For Health Affairs is an 2 organization that, that -- if this is the one I 3 think it is -- it was Community Solutions. I'm 4 trying to see if it's the same one. 5 Q. This slide deck indicates that this 6 presentation was made by the Center For Health 7 Affairs, and the title is ADAMHS Board Needs 8 Analysis; do you see that? 9 A. I see that. 10 Q. What is the relationship between 11 the ADAMHS Board for Cuyahoga County and the 12 Center For Health Affairs? 13 A. Well, it's a collegial 14 relationship. We don't report to them, they 15 don't fund us. They are an organization that 16 looks at various health programs, makes 17 recommendations and comments, and is a valuable 18 asset to the community. 19 Q. Does the ADAMHS Board for Cuyahoga 20 County provide funding in any way to The Center 21 For Health Affairs? 22 A. At times it does, if we ask for a 23 specific project or program, and this has drawn 24 my memory back. 25 Q. What does The Center For Health</p>

<p style="text-align: right;">Page 110</p> <p>1 Affairs do?</p> <p>2 MS. SACKS: Objection.</p> <p>3 A. I believe The Center For Health</p> <p>4 Affairs is an organization that has the ability</p> <p>5 to make presentations, evaluations, and comment</p> <p>6 upon various health affairs, if you will, in</p> <p>7 the community.</p> <p>8 Q. Okay. This slide deck, at page 13,</p> <p>9 if you go to slide 13, that's a number that's</p> <p>10 in the bottom right-hand corner of the page,</p> <p>11 has a slide about funding and expenditures for</p> <p>12 the ADAMHS Board, and I wanted to use this</p> <p>13 slide to ask you some questions about funding</p> <p>14 and expenditures by the ADAMHS Board. Are you</p> <p>15 at slide 13?</p> <p>16 A. Yes, sir.</p> <p>17 Q. Do you see in the middle of the</p> <p>18 page there is a pie chart?</p> <p>19 A. I see it.</p> <p>20 Q. Does this slide reflect the sources</p> <p>21 of revenue that the ADAMHS Board had, at least</p> <p>22 as of 2015?</p> <p>23 A. Yes.</p> <p>24 Q. It indicates that some of the funds</p> <p>25 are from county levies, some are from federal</p>	<p style="text-align: right;">Page 112</p> <p>1 time to time, and two, it's up for contract, up</p> <p>2 for bid by the contracts, so...</p> <p>3 Q. Okay. Let's see if we can break</p> <p>4 that down just a little bit more.</p> <p>5 A. Sure.</p> <p>6 Q. Let's look first at the county</p> <p>7 funds. Are any of the funds that are provided</p> <p>8 to ADAMHS Board -- let me say it just slightly</p> <p>9 differently.</p> <p>10 Have any of the funds provided to</p> <p>11 the ADAMHS Board by Cuyahoga County been</p> <p>12 earmarked or designated for opioid-related</p> <p>13 expenditures?</p> <p>14 A. I believe some have, but I can't</p> <p>15 determine which ones. I can't remember which</p> <p>16 ones.</p> <p>17 Q. Can you identify any earmarked</p> <p>18 funds that the county has given to ADAMHS Board</p> <p>19 that are specifically designated for</p> <p>20 opioid-related expenditures?</p> <p>21 A. No.</p> <p>22 Q. What percentage of the funding that</p> <p>23 comes directly from the county is discretionary</p> <p>24 versus earmarked?</p> <p>25 A. I do not recall. I don't remember.</p>
<p style="text-align: right;">Page 111</p> <p>1 funds, some are from state funds, and some are</p> <p>2 from grants that presumably are from private</p> <p>3 entities; is that right?</p> <p>4 A. Correct.</p> <p>5 Q. What percentage of the</p> <p>6 funds -- well, let me just back up one second.</p> <p>7 Earlier today you indicated that</p> <p>8 there is some discretion in how the ADAMHS</p> <p>9 Board uses some of the funds that are available</p> <p>10 to it; is that right?</p> <p>11 A. Yes, I said that.</p> <p>12 Q. And can you describe what you meant</p> <p>13 by that just a little bit more?</p> <p>14 A. Discretion as to who we select to</p> <p>15 receive these awards. Out of all these</p> <p>16 categories, there might be 150 different</p> <p>17 contracts.</p> <p>18 Q. Are you able to determine in any</p> <p>19 way what percentage of expenditures the ADAMHS</p> <p>20 Board has made in financing these services that</p> <p>21 directly go to opioid-related services?</p> <p>22 MS. SACKS: Objection.</p> <p>23 A. No.</p> <p>24 Q. Why are you not able to do that?</p> <p>25 A. Well, one thing is, it changes from</p>	<p style="text-align: right;">Page 113</p> <p>1 Q. How would we go about trying to</p> <p>2 figure that out?</p> <p>3 MS. SACKS: Objection.</p> <p>4 A. Well, you'd have to take the</p> <p>5 budget, and take every line item on it, and go</p> <p>6 through it.</p> <p>7 Q. Are you talking about the ADAMHS</p> <p>8 budget?</p> <p>9 A. Yes.</p> <p>10 Q. Who was responsible for the ADAMHS</p> <p>11 budget during the period of time that you were</p> <p>12 the chief executive officer?</p> <p>13 A. What time period?</p> <p>14 Q. Well, you were the chief executive</p> <p>15 officer, as I understand it --</p> <p>16 A. No. I mean, there is two of them,</p> <p>17 that's the reason I asked.</p> <p>18 Q. Well, just tell me both and what</p> <p>19 periods of time those individuals had</p> <p>20 responsibility.</p> <p>21 A. Cassandra Richardson from 2009 to</p> <p>22 2012 maybe, and then there was another</p> <p>23 gentleman, his name escapes me right at the</p> <p>24 moment -- before we leave I'll give you his</p> <p>25 name -- from then until the time I left.</p>

<p style="text-align: right;">Page 114</p> <p>1 I just can't remember his name</p> <p>2 right now, but I'll give it to you before we</p> <p>3 leave.</p> <p>4 Q. That's fine. Will you just let me</p> <p>5 know --</p> <p>6 A. Sure.</p> <p>7 Q. -- when that name comes to mind?</p> <p>8 A. Sure. Sure.</p> <p>9 Q. I believe you indicated that the</p> <p>10 ADAMHS Board had made some expenditures related</p> <p>11 to opioid abuse, addiction and overdose out of</p> <p>12 discretionary funds that were available to the</p> <p>13 board; did I understand that correctly?</p> <p>14 A. Yes.</p> <p>15 Q. What were the discretionary</p> <p>16 expenditures that the ADAMHS Board has made</p> <p>17 specifically related to opioid abuse?</p> <p>18 A. What's the question? What do we</p> <p>19 fund?</p> <p>20 Q. You indicated that there were these</p> <p>21 discretionary expenditures, right?</p> <p>22 A. They came from the health and human</p> <p>23 service levy.</p> <p>24 Q. Okay.</p> <p>25 A. Okay. And you want examples of</p>	<p style="text-align: right;">Page 116</p> <p>1 see if their use of fentanyl or not. That's an</p> <p>2 example.</p> <p>3 Q. Can you think of any other</p> <p>4 expenditures that the ADAMHS Board has made,</p> <p>5 during the time that you were the chief</p> <p>6 executive officer, that were directed</p> <p>7 specifically at understanding or addressing --</p> <p>8 A. Prevention programs.</p> <p>9 Q. Sorry. I just had to finish my</p> <p>10 question.</p> <p>11 A. I'm sorry.</p> <p>12 Q. No. That's okay.</p> <p>13 Can you think of any other</p> <p>14 expenditures that the ADAMHS Board has made,</p> <p>15 during the time that you were the chief</p> <p>16 executive officer, that were directed</p> <p>17 specifically at understanding or addressing</p> <p>18 opioid abuse or overdose in the community,</p> <p>19 other than the ones you have now already</p> <p>20 referenced?</p> <p>21 A. I understand the question to be to</p> <p>22 understand the abuse of.</p> <p>23 Q. Or to address the impact of.</p> <p>24 A. I take the impact in terms of</p> <p>25 treatment. Then what I just explained to you,</p>
<p style="text-align: right;">Page 115</p> <p>1 what they would be for?</p> <p>2 Q. Correct. I'm asking you to</p> <p>3 identify --</p> <p>4 A. Sure.</p> <p>5 Q. -- those expenditures that were</p> <p>6 specifically made related to the opioid</p> <p>7 epidemic?</p> <p>8 A. Sure. This is not in the level of</p> <p>9 importance or size, but the Narcan project was</p> <p>10 the Dawn project with MetroHealth.</p> <p>11 Q. Was the Dawn or Narcan project</p> <p>12 funded out of the HHS levy funds?</p> <p>13 A. That's where we got the money, yes.</p> <p>14 Q. Was the Dawn project in part funded</p> <p>15 by state dollars?</p> <p>16 A. I don't know. I mean, they could</p> <p>17 have. I don't know. I was giving you</p> <p>18 examples.</p> <p>19 Q. Yes, please. Go ahead.</p> <p>20 A. Medically assisted treatment beds,</p> <p>21 sober beds, detox unit, and miscellaneous</p> <p>22 things. Like somebody developed a strip on how</p> <p>23 to identify something that had fentanyl in it,</p> <p>24 and they would give it to the needle exchange</p> <p>25 program for those to have the opportunity to</p>	<p style="text-align: right;">Page 117</p> <p>1 and in prevention, it could have been funds to</p> <p>2 have public meetings, it could be development</p> <p>3 of news announcements and literature, besides</p> <p>4 what I already explained.</p> <p>5 Q. To what extent did the ADAMHS Board</p> <p>6 expend funds for public meetings directly in</p> <p>7 connection with opioid abuse?</p> <p>8 A. I could give you an example.</p> <p>9 Q. I'm looking -- an example would be</p> <p>10 fine, but what I'm really looking for is to</p> <p>11 understand the extent to which that was done</p> <p>12 and how much money was spent?</p> <p>13 A. I can't tell you.</p> <p>14 Q. Why not?</p> <p>15 A. I just can't remember.</p> <p>16 Q. Would that be identified in a line</p> <p>17 item in the ADAMHS budget?</p> <p>18 A. It may and it may not.</p> <p>19 Q. Why would it not be?</p> <p>20 A. Public funding is not as black and</p> <p>21 white as you might think.</p> <p>22 We start at the beginning of the</p> <p>23 year, we have budgets. Most of the budget on</p> <p>24 public funding is personnel. Rarely is the</p> <p>25 whole personnel budget line used. Sometimes it</p>

<p style="text-align: right;">Page 118</p> <p>1 is, sometimes it isn't. And many times people 2 come and go, and it takes a long time to 3 replace people, and you have a reserve at the 4 end of the year, in October, November, 5 December, resulting from not using all of the 6 funding on the personnel line. 7 And many times we take that and use 8 it on discretionary dollars -- as discretionary 9 dollars, and it varies from every year and 10 opportunity, and what could you do before the 11 end of the year. So that's an example of where 12 discretionary comes from and understanding that 13 it changes all the time, and that's where it 14 comes from. 15 Q. Do ADAMHS Board personnel track 16 their time on a daily basis? 17 MS. SACKS: Objection. 18 A. I don't understand the question. 19 Q. Well, I, as a lawyer, have to write 20 down every day how much time I spend on each 21 task. 22 A. As you should. 23 Q. My question to you is whether or 24 not -- Shayna probably doesn't have to do that, 25 but I do.</p>	<p style="text-align: right;">Page 120</p> <p>1 Q. You mentioned the fentanyl test 2 strips. Is it your understanding that the 3 fentanyl testing strips were funded by money 4 out of the HHS levy? 5 A. Yes. 6 Q. How much money was spent by ADAMHS 7 in connection with the fentanyl testing strips? 8 A. I can't remember the exact amount, 9 but it was a very small amount of money. 10 Q. When you say, "A very small 11 amount," what do you mean? 12 A. As compared to other accounts. It 13 was like \$15,000. 14 Q. You indicated that one expenditure 15 related to opioids might have to do with 16 detoxification units? 17 A. Yes. 18 Q. How much money did the ADAMHS Board 19 spend on opioid-related detoxification? 20 A. Well, I don't know, other than the 21 fact that it was about \$900,000 for the unit, 22 and we opened it because of the increase in the 23 opiates. 24 Q. Did the detoxification unit that 25 cost approximately \$900,000 deal exclusively</p>
<p style="text-align: right;">Page 119</p> <p>1 So my question to you is whether or 2 not personnel for the ADAMHS Board track 3 exactly how they are spending their time on a 4 daily basis? 5 A. They get paid by a time clock 6 method. The executive director, CEO, I was 7 paid by a salary. 8 And by the time clock method, if 9 they put more time in, they get paid overtime 10 for that. They do not clock, out of 40 hours, 11 22 hours for this project and 16 hours for this 12 project. They get paid for the job that they 13 do. 14 Q. Okay. So it's more of a -- they 15 keep track of the total time, but they are not 16 identifying exactly how that time is spent, 17 fair? 18 A. That's correct. Unless I want them 19 to do it on a specific project, and that's 20 not -- that's rare. 21 Q. Did you ever request that ADAMHS 22 personnel track their time spent on activities 23 that were specifically related to opioid abuse 24 or addiction? 25 A. No. No.</p>	<p style="text-align: right;">Page 121</p> <p>1 with opioid abuse, or did it deal with abuse of 2 other substances as well? 3 A. I don't know. All I know is that 4 the purpose was to deal with the opiate influx 5 coming in, that we had not enough, and we 6 didn't have a policy saying, "Okay, opiates 7 only." If somebody came in with something 8 else, we would treat them also. 9 Q. Did the ADAMHS Board or any of its 10 service providers keep track of the extent to 11 which the detoxification unit was used to treat 12 opioid substance-use disorder versus other 13 substance-use disorders? 14 A. They could have. 15 Q. Do you know if it did or not? 16 A. No, I don't. 17 Q. Who would we ask to determine 18 whether or not the detoxification expenditures 19 were tracked such that one could determine 20 whether or not the services were opioid 21 specific versus related to other substances? 22 A. You would start with Scott, and he 23 would go to the provider. 24 Q. So if we asked Mr. Osiecki and he 25 didn't know, what would we do then?</p>

<p style="text-align: right;">Page 122</p> <p>1 A. Well, go to the provider. 2 Q. Who would the provider be? 3 A. I believe the provider is Catholic 4 Charities. 5 Q. Any other providers who were 6 involved in the detoxification expenditures 7 that you're talking about now? 8 A. I can't think of them right now. 9 Q. Are there others, and you just 10 can't think of them? 11 A. I just can't think of them right 12 now. 13 Q. My question is: Do you know that 14 there are other providers? 15 A. I don't know. I don't know. 16 Q. And then you mentioned the sober 17 beds. How much money has the ADAMHS Board 18 spent on sober beds specifically related to 19 opioid abuse and addiction? 20 A. I don't know. 21 Q. How would we figure that out? 22 A. I don't know. 23 Q. Do you know if there is any way to 24 try and track that with that kind of 25 specificity?</p>	<p style="text-align: right;">Page 124</p> <p>1 individuals who have substance-use disorders 2 other than opiate-related disorders? 3 A. It could be, yes. 4 Q. And then you mentioned Narcan and 5 the DAWN project. How much money did the 6 ADAMHS Board spend out of its funds on the 7 Narcan or Dawn project? 8 A. I can't tell you, but you could 9 find that out easy enough every year, because 10 they keep a record of that. 11 Q. When did that project begin? 12 A. When the DAWN project began, I 13 thought 2012 or 13 -- or it was 13 or 14 -- I'm 14 sorry -- in that time period. 15 Q. In the 2012 to 13 timeframe? 16 A. I believe so. 17 Q. Who ran the Dawn program? 18 A. MetroHealth. 19 Q. Are there any expenditures related 20 to opioids that the ADAMHS Board has made that 21 we have not now discussed? 22 A. I don't recall. 23 Q. Sitting here today, you cannot 24 recall any other expenditures related to 25 opioids --</p>
<p style="text-align: right;">Page 123</p> <p>1 A. I don't know if that's possible or 2 not. 3 Q. Why not? 4 Let me ask it this way: Why might 5 it not be possible? 6 A. Because we didn't -- we didn't set 7 it up to do it that way. We set it up to deal 8 with the increase in the use of sober beds 9 because of the opiate epidemic, and that would 10 take care of all the back waiting periods, 11 backlog of people needing services, and I don't 12 know if they made a record of that or not. 13 Q. Who would we ask? 14 MS. SACKS: Objection. 15 A. I don't know. Frankly, it would 16 probably be by individual provider, and if we 17 are going back three or four years, I don't 18 know what you are going to get. 19 Q. Does the ADAMHS Board have some 20 kind of database by which it tracks claims data 21 that are made by the service providers that the 22 ADAMHS Board funds? 23 A. I don't think so. 24 Q. Do the sober beds that you are 25 referring to now provide services to</p>	<p style="text-align: right;">Page 125</p> <p>1 A. Other than what you've -- 2 Q. Sorry. 3 A. I'll wait. 4 Q. Let me just start it over, make 5 sure the record is clean. 6 Are you able to identify any other 7 expenditures related to opioids that the ADAMHS 8 Board for Cuyahoga County has made that we have 9 not already discussed today? 10 A. I do not believe so. 11 Q. If you turn to the next slide, it's 12 slide 14, we can see a summary that organizes 13 or categorizes expenditures by the ADAMHS Board 14 from 2013 to 2015 in a slightly different way. 15 MS. SACKS: You asked slide 14, 16 right? 17 MR. BOEHM: Slide 14. 18 MS. SACKS: He's talking about this 19 one on top. It is double sided. 20 Q. You see slide 14 there that's in 21 front of you now? 22 A. Yes, I do. 23 Q. You mentioned sober beds, and if 24 you look, the third to the end -- the category 25 that's the third to the end on this particular</p>

Page 126

1 summary references sober beds; do you see that?

2 A. Yes.

3 Q. Are these the sober bed

4 expenditures that you had in mind when you

5 identified those earlier today?

6 A. I don't know. I don't know. I

7 don't know if it does or not.

8 Q. And this slide identifies various

9 other categories as well of ADAMHS Board

10 expenditures, correct?

11 A. Uh-huh.

12 Q. You have to say yes or no.

13 A. I'm sorry, sir. Yes.

14 Q. Prevention services, right?

15 A. Right. Outpatient treatment,

16 psychiatric services --

17 Q. Right.

18 A. -- detoxification and so forth.

19 Q. Are you able to, for each of these

20 categories, determine how much of these dollars

21 were opioid-related expenditures?

22 A. No.

23 Q. Is it possible to do that?

24 MS. SACKS: Objection.

25 A. I don't know. I didn't put it

Page 127

1 together. Somebody else put it together.

2 Q. Who do you believe would know

3 whether or not it is possible to identify how

4 much of the dollars -- how many of the dollars

5 spent in each category, as reflected on slide

6 14 of Exhibit 3, were opioid-related

7 expenditures?

8 MS. SACKS: Objection.

9 A. The persons that put it together,

10 Center For Family Health Affairs.

11 Q. Is there anybody at the ADAMHS

12 Board who would be able to answer that

13 question?

14 MS. SACKS: Objection. Form.

15 A. I don't know. I don't know.

16 Q. Is alcohol addiction the most

17 common substance-use disorder --

18 MS. SACKS: Objection.

19 Q. -- that the ADAMHS Board provides

20 services for in Cuyahoga County?

21 A. It was, until the opiate epidemic

22 hit.

23 Q. Is it your testimony here today

24 that addiction to opioids is more common in

25 Cuyahoga County than addiction to alcohol?

Page 128

1 MS. SACKS: Objection.

2 A. It is my testimony that at certain

3 locations, where alcohol was 90 percent or 80

4 percent, now opiates has taken that over, in

5 terms of treatment.

6 Q. Is it your testimony that

7 addiction -- let me just ask it this way: Do

8 you agree that alcohol addiction is the most

9 common substance-use disorder?

10 A. Yes, I do.

11 MS. SACKS: Objection.

12 Q. And that's true today?

13 A. No, I do. No, I do. I do agree

14 with that. But I don't think that's the

15 question I answered.

16 Q. Okay. But that's the question I

17 intended to ask, so let's stick with that one.

18 A. Okay. So...

19 Q. Alcohol addiction today is the most

20 common form of substance-use disorder in

21 Cuyahoga County, correct?

22 A. Yes.

23 MS. SACKS: Objection.

24 A. Yes, it is.

25 Q. And that has always been true

Page 129

1 during the years that you have been the chief

2 executive officer of the ADAMHS Board?

3 MS. SACKS: Objection.

4 A. That's correct.

5 MS. SACKS: Remember to wait until

6 he's done with his question, because she's

7 typing. You're good.

8 A. Are you waiting for me?

9 MS. SACKS: No, no. That was the

10 phone.

11 Q. I'm not waiting for you, no. I'm

12 just getting to my next question, while

13 somebody was sending us a fax, I think, over

14 the phone.

15 You mentioned Mr. Osiecki a couple

16 of times today. Who is Scott Osiecki?

17 A. He is the present CEO of the ADAMHS

18 Board.

19 Q. Did he replace you in that

20 position?

21 A. No.

22 Q. Who was in between you and Mr.

23 Osiecki?

24 A. Valeria Harper.

25 Q. For how long was Ms. Harper the CEO

<p style="text-align: right;">Page 130</p> <p>1 of the ADAMHS Board?</p> <p>2 A. About six months.</p> <p>3 Q. Why was her stay so short?</p> <p>4 A. She died.</p> <p>5 Q. Sorry to hear that.</p> <p>6 A. Tragically.</p> <p>7 Q. And then Mr. Osiecki became the CEO</p> <p>8 of the ADAMHS Board?</p> <p>9 A. Uh-huh. Yes.</p> <p>10 Q. Did you work with Mr. Osiecki</p> <p>11 during your time as the CEO?</p> <p>12 A. Yes.</p> <p>13 For the record, Frank Brickner was</p> <p>14 the person that -- the finance person that you</p> <p>15 wanted to know.</p> <p>16 Q. Oh, okay. Great. So when you were</p> <p>17 earlier trying to remember the name of the</p> <p>18 individual --</p> <p>19 A. Exactly.</p> <p>20 Q. -- responsible for budgeting and</p> <p>21 expenditures, that person was Mr. Frank</p> <p>22 Brickner?</p> <p>23 A. Uh-huh.</p> <p>24 Q. Yes?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 132</p> <p>1 sent to you and others.</p> <p>2 A. Uh-huh.</p> <p>3 Q. I'll give you a chance to take a</p> <p>4 look at this, and my question to you is whether</p> <p>5 or not you remember this document?</p> <p>6 A. Yes, I do.</p> <p>7 Q. This document refers to residential</p> <p>8 treatment and sober recovery beds; do you see</p> <p>9 that?</p> <p>10 A. Yes.</p> <p>11 Q. And earlier today you had told me</p> <p>12 that in your final year as CEO of the ADAMHS</p> <p>13 Board for Cuyahoga County, there had been a</p> <p>14 request to the county council and county</p> <p>15 executive for funding specifically for sober</p> <p>16 beds in response to the opioid abuse epidemic</p> <p>17 in the county, right?</p> <p>18 A. Correct.</p> <p>19 Q. Does this document reflect that</p> <p>20 request?</p> <p>21 A. Yes, it does.</p> <p>22 Q. It appears that in the category of</p> <p>23 medication assisted treatment based services</p> <p>24 and sober beds, Mr. Brickner has put the number</p> <p>25 \$2,647,277 next to that category; do you see</p>
<p style="text-align: right;">Page 131</p> <p>1 Q. And he is the sender of the email</p> <p>2 that has now been marked as Exhibit 4.</p> <p>3 A. Yes.</p> <p>4 - - - - -</p> <p>5 (Thereupon, Deposition Exhibit 4,</p> <p>6 Designated Confidential, 6/16/2017</p> <p>7 Email, Subject: Document for Opioid</p> <p>8 Epidemic, with Attachment, Beginning</p> <p>9 with Bates Label CUYAH 012582972,</p> <p>10 was marked for purposes of</p> <p>11 identification.)</p> <p>12 - - - - -</p> <p>13 Q. So that was fortuitous.</p> <p>14 This is a June 16, 2017 email, and</p> <p>15 you and Ms. Harper and others are recipients of</p> <p>16 the email. The subject is Document For Opioid</p> <p>17 Epidemic; do you see that?</p> <p>18 A. Yes.</p> <p>19 Q. Mr. Brickner writes that he started</p> <p>20 the document discussed yesterday regarding a</p> <p>21 response to the opioid epidemic, it is a rough</p> <p>22 draft, and he welcomes input; do you see that?</p> <p>23 A. Yes.</p> <p>24 Q. Attached to the email, as part of</p> <p>25 Exhibit 4, is the document that Mr. Brickner</p>	<p style="text-align: right;">Page 133</p> <p>1 that?</p> <p>2 A. Yes.</p> <p>3 Q. Are you able to say the extent to</p> <p>4 which -- well, let me back up for just a</p> <p>5 second.</p> <p>6 Did the county council agree to</p> <p>7 provide the funding that the ADAMHS Board had</p> <p>8 requested for medication assisted treatment</p> <p>9 based services and sober beds?</p> <p>10 MS. SACKS: Objection.</p> <p>11 A. I don't believe the entire amount</p> <p>12 was funded.</p> <p>13 Q. Do you know how much of the ADAMHS</p> <p>14 Board's request was funded in connection with</p> <p>15 medication assisted treatment based services</p> <p>16 and sober beds?</p> <p>17 A. I believe half the funding -- I</p> <p>18 can't remember. I can't remember.</p> <p>19 Q. You started to say you thought it</p> <p>20 might have been half?</p> <p>21 A. Yeah, but I'm guessing, and I don't</p> <p>22 want to guess. I just don't know.</p> <p>23 Q. Do you remember approximately how</p> <p>24 much of the request was granted by the county</p> <p>25 council?</p>

<p style="text-align: right;">Page 134</p> <p>1 A. No, I don't. No, I don't know. I 2 thought I would by looking at it, but I'm 3 having a hard time trying to figure out which 4 was funded and which was not. 5 Q. What was the source or sources of 6 the funds that were granted for purposes of 7 medication assisted treatment based services 8 and sober beds? 9 A. I had explained to you earlier 10 about the residue reserve from not spending all 11 of a budget. This is the primary source from 12 the ADAMHS Board. The other two sources was 13 the county and the City of Cleveland. And I 14 don't know if I had left by the time this was 15 all over, and I don't know if those moneys were 16 collected in full or not. 17 Q. Okay. We will get a little help if 18 we look at the last page of the document. Page 19 4 of 4, about halfway down, it say, "Currently 20 of the \$3,927,331 of initiatives" -- 21 A. Okay. This is helpful. 22 Q. -- "2,625,000 of additional funding 23 was provided to the ADAMHS Board as follows"; 24 do you see that? 25 A. Uh-huh. Yes.</p>	<p style="text-align: right;">Page 136</p> <p>1 Q. You were a recipient on this email 2 though, right? 3 A. Yeah, I was. Yeah. 4 Q. And this had happened before 5 June -- 6 A. It says the Federal CURES Act. I 7 don't know how far that went and whether that 8 was -- I can't remember if that was totally 9 approved or not. 10 Q. Approved by whom? 11 A. By the Feds. I don't know. That's 12 the sticking point. I don't know if it was or 13 not. 14 Q. Let's look at the language again of 15 the document. It says that \$2,625,000 of 16 additional funding was provided to the ADAMHS 17 Board as follows; do you see that? 18 A. I see it. 19 Q. That's in past tense? 20 A. Yes, it is. 21 Q. And that indicates that this money 22 had already been provided to ADAMHS Board? 23 A. Okay. So -- 24 MS. SACKS: Objection. 25 A. I don't know.</p>
<p style="text-align: right;">Page 135</p> <p>1 Q. It indicates that the county itself 2 provided \$250,000, right? 3 A. Correct. 4 Q. The City of Cleveland provided 5 another \$250,000, right? 6 A. Yeah. 7 Q. And \$2,125,000 was provided by the 8 federal government through the CURES Act, 9 C-U-R-E-S, correct? 10 A. Correct. 11 Q. So the bulk of this money actually 12 came from the federal government, right? 13 A. Well -- 14 MS. SACKS: Objection. 15 A. I don't know. I don't know. 16 Q. Why don't you know? 17 A. Because I can't remember. 18 Q. Well, it says it right here on the 19 page; doesn't it? 20 MS. SACKS: Objection. 21 A. I know that's what it says, but I 22 do not know -- I don't know. 23 Q. When it says here -- 24 A. This was produced June 16. I was 25 gone in two weeks after that.</p>	<p style="text-align: right;">Page 137</p> <p>1 Q. You know what the past tense is, 2 right? 3 MS. SACKS: Objection. 4 A. I do know what the past tense is, 5 and you asked me what I know, and I'm telling 6 you I don't know if this total amount is the 7 total amount that actually happened, and it's 8 not unusual for it to happen. So I don't know. 9 Q. It's not unusual for what to 10 happen? 11 A. Budgets change while they are in 12 stream. 13 Q. Do you see on the first page, it 14 says that, "The charts below identify the 15 services commenced/enhanced"? 16 A. Okay. It's not going to change my 17 answer. I don't know. 18 Q. Well, I would like you to look at 19 the document before you decide whether you are 20 going to change your answer or not. 21 A. Okay. 22 Q. That's only fair. 23 MS. SACKS: Objection. 24 Q. You see here it says, "The charts 25 below identify the services</p>

<p style="text-align: right;">Page 138</p> <p>1 commenced/enhanced"?</p> <p>2 A. Uh-huh.</p> <p>3 Q. Yes?</p> <p>4 A. Yes, I see it.</p> <p>5 Q. And, indeed, some of the money has</p> <p>6 already been apportioned out among the various</p> <p>7 service providers?</p> <p>8 A. Exactly.</p> <p>9 Q. Do you have any memory of this at</p> <p>10 all, or is this just a blank slate for you?</p> <p>11 MS. SACKS: Objection.</p> <p>12 A. No. We enhance the services and</p> <p>13 accept the responsibility of paying for those</p> <p>14 services that were enhanced and covered, and I</p> <p>15 believe that we acted in good faith. I just</p> <p>16 don't know how much of this eventually worked</p> <p>17 out. That's what I'm trying to say.</p> <p>18 Q. You know this isn't a projected</p> <p>19 budget, right, this is a summary of what has</p> <p>20 happened?</p> <p>21 A. Yes, it is. Right.</p> <p>22 Q. And you don't have any reason to</p> <p>23 disagree with the information that's provided</p> <p>24 in this document, do you?</p> <p>25 A. No, I don't.</p>	<p style="text-align: right;">Page 140</p> <p>1 various different sources, or were the reserve</p> <p>2 funds funds that were set aside from one source</p> <p>3 or another?</p> <p>4 A. They would come from various</p> <p>5 sources.</p> <p>6 Q. What is the Federal CURES Act?</p> <p>7 A. I cannot remember exactly what it</p> <p>8 was. It was new then. I just don't remember.</p> <p>9 Q. You don't remember the details, but</p> <p>10 do you remember the term?</p> <p>11 A. I remember the term.</p> <p>12 Q. Do you know if the money from the</p> <p>13 Federal Cures Act was earmarked for specific</p> <p>14 purposes or if it was available for the ADAMHS</p> <p>15 Board's discretion?</p> <p>16 A. I think it was discretion. Well,</p> <p>17 wait a minute. I stand corrected. I think</p> <p>18 that it was earmarked for opiate, yeah, I</p> <p>19 think.</p> <p>20 Q. With respect to the \$250,000 that</p> <p>21 was provided by the county, do you know out of</p> <p>22 what revenue source those \$250,000 were drawn?</p> <p>23 A. No.</p> <p>24 Q. Do you know whether or not the</p> <p>25 county provided any funds beyond the \$250,000</p>
<p style="text-align: right;">Page 139</p> <p>1 Q. And back on page 4, it says that,</p> <p>2 "The remaining funding for this initiative,</p> <p>3 \$1,302,331, came from ADAMHS reserves, which</p> <p>4 are now near depleted"; do you see that?</p> <p>5 A. Uh-huh.</p> <p>6 Q. Yes?</p> <p>7 A. Yes, I do.</p> <p>8 Q. What are the sources of the ADAMHS</p> <p>9 reserve funds that are referenced here in</p> <p>10 connection with these initiatives?</p> <p>11 A. They are the funds kept over from</p> <p>12 the previous budget that are reserved from</p> <p>13 funds not expended.</p> <p>14 Q. Was there ever a time during your</p> <p>15 tenure as the chief executive officer for the</p> <p>16 ADAMHS Board when the ADAMHS Board spent more</p> <p>17 money than it had available?</p> <p>18 MS. SACKS: Objection.</p> <p>19 A. I don't believe so.</p> <p>20 Q. Did you always have a surplus at</p> <p>21 the end of each year?</p> <p>22 MS. SACKS: Objection.</p> <p>23 A. It would indicate yes, we had a</p> <p>24 little bit of reserve every year.</p> <p>25 Q. Would the reserve funds come from</p>	<p style="text-align: right;">Page 141</p> <p>1 that are referenced here to the ADAMHS Board in</p> <p>2 connection with opioid-related expenditures?</p> <p>3 A. No, I don't.</p> <p>4 Q. Has the ADAMHS Board ever asked the</p> <p>5 county to raise new taxes or new funds in order</p> <p>6 to address the issue of opioid addiction, abuse</p> <p>7 or overdose?</p> <p>8 MS. SACKS: Objection.</p> <p>9 A. No.</p> <p>10 Q. You have, from time to time,</p> <p>11 presented in public fora about the opioid issue</p> <p>12 and trends in the community, correct?</p> <p>13 A. Yes.</p> <p>14 Q. Do you remember when you first did</p> <p>15 that?</p> <p>16 A. No.</p> <p>17 MS. SACKS: Objection.</p> <p>18 Q. Do you recall at one time</p> <p>19 testifying before the Ohio General Assembly</p> <p>20 about opioid issues?</p> <p>21 A. No, I don't remember, but I know I</p> <p>22 did it.</p> <p>23 Q. Do you remember testifying before</p> <p>24 the Ohio Senate Finance Committee about issues</p> <p>25 related to opioids?</p>

<p style="text-align: right;">Page 142</p> <p>1 A. I could have done that, yes.</p> <p>2 Q. Do you remember that?</p> <p>3 MS. SACKS: Objection.</p> <p>4 A. I remember going to Columbus on a</p> <p>5 number of occasions to testify. On a specific</p> <p>6 date, I can't remember that.</p> <p>7 - - - - -</p> <p>8 (Thereupon, Deposition Exhibit 5,</p> <p>9 Designated Confidential, 5/16/2011</p> <p>10 Email, Subject: Open This One For</p> <p>11 Mr. Denihan's Testimony, with</p> <p>12 Attachment, Beginning with Bates</p> <p>13 Label CUYAH 012536538, was marked</p> <p>14 for purposes of identification.)</p> <p>15 - - - - -</p> <p>16 Q. I want to show you a document I've</p> <p>17 marked as Exhibit 5. This is an email that was</p> <p>18 sent by Mr. Scott Osiecki to Cheri Walter and</p> <p>19 Suzanne Dulaney, with you being copied; do you</p> <p>20 see that?</p> <p>21 A. Yes.</p> <p>22 Q. And Mr. Osiecki indicates that he</p> <p>23 is sending along a version of your testimony,</p> <p>24 and that testimony is before the senate finance</p> <p>25 committee in May of 2011, right?</p>	<p style="text-align: right;">Page 144</p> <p>1 A. I don't recall it specifically.</p> <p>2 Q. All right. Let's look at the</p> <p>3 testimony that you provided. It appears that</p> <p>4 your testimony in May 2011 had to do with</p> <p>5 Amended Substitute Bill 153; do you remember</p> <p>6 that at all?</p> <p>7 A. It was that biennial budget bill,</p> <p>8 yes, sir.</p> <p>9 Q. About halfway down the page, it</p> <p>10 says here in your testimony that, "Funding for</p> <p>11 mental health community service is being cut by</p> <p>12 30 percent, while the entire state budget has</p> <p>13 been reduced by 20 percent. Why this</p> <p>14 disproportional cut to community services?"; do</p> <p>15 you see that?</p> <p>16 A. Yeah, I do see it.</p> <p>17 Q. What was the point that you were</p> <p>18 making in your testimony to the Ohio Senate</p> <p>19 Finance Committee?</p> <p>20 A. Let me finish reading.</p> <p>21 Q. Certainly.</p> <p>22 A. Okay.</p> <p>23 Q. What is the point that you were</p> <p>24 making to the Ohio Senate Finance Committee in</p> <p>25 May 2011?</p>
<p style="text-align: right;">Page 143</p> <p>1 A. Uh-huh. Okay.</p> <p>2 Q. You see that?</p> <p>3 A. Yes.</p> <p>4 Q. Who is Cheri Walter?</p> <p>5 A. She's the executive director of the</p> <p>6 organization we talked about earlier that I was</p> <p>7 a member of. Excuse me. All of the mental</p> <p>8 health and drug boards.</p> <p>9 Q. That's the OACBHA?</p> <p>10 A. I believe so.</p> <p>11 Q. The next paragraph of Mr. Osiecki's</p> <p>12 email indicates -- or requests to confirm that</p> <p>13 the message has been received, as well as the</p> <p>14 one with Conwell's testimony; do you see that?</p> <p>15 A. Yes.</p> <p>16 Q. Do you know who the Conwell is</p> <p>17 that's being referred to there?</p> <p>18 A. I believe it is Yvonne Conwell.</p> <p>19 Q. That's the person you mentioned</p> <p>20 earlier --</p> <p>21 A. Yes.</p> <p>22 Q. -- that's on the county council?</p> <p>23 A. Yes.</p> <p>24 Q. Do you recall going with Ms.</p> <p>25 Conwell to testify before the Ohio Senate?</p>	<p style="text-align: right;">Page 145</p> <p>1 A. That they were proposing to reduce</p> <p>2 the funding.</p> <p>3 I got a muscle cramp in my leg.</p> <p>4 Q. Do you want to take a break?</p> <p>5 A. Yeah, I do, but let me finish this.</p> <p>6 Q. Sure.</p> <p>7 A. It was just totally inadequate, in</p> <p>8 terms of mental health and addiction funding,</p> <p>9 and we were letting them know that this would</p> <p>10 have serious consequences on the people living</p> <p>11 in Cuyahoga County.</p> <p>12 Q. Why do you believe there has been</p> <p>13 so much reluctance among public officials</p> <p>14 within the state to fund mental health and</p> <p>15 addiction treatment services at the local</p> <p>16 level?</p> <p>17 MS. SACKS: Objection.</p> <p>18 A. Well, there is two parts there. I</p> <p>19 have to understand both parts. Why public</p> <p>20 officials, do you mean statewide public</p> <p>21 officials?</p> <p>22 Q. That's what I'm asking about. What</p> <p>23 is your understanding as to why there has been</p> <p>24 reluctance by state public officials to fund</p> <p>25 mental health and addiction services that are</p>

<p style="text-align: right;">Page 146</p> <p>1 provided at the local level?</p> <p>2 A. That are provided at the local</p> <p>3 level, okay. I thought that were enacted at</p> <p>4 the local level.</p> <p>5 Excuse me, I'm sorry.</p> <p>6 Q. Would you like to break?</p> <p>7 A. I don't know why. It's been a</p> <p>8 frustration, since I took the job, going down</p> <p>9 there to testify. I don't know why there is a</p> <p>10 mindset on behavioral health, and behavioral</p> <p>11 health, across the country, awards between 75</p> <p>12 and 80 percent to mental health and 20 percent</p> <p>13 to addiction.</p> <p>14 And I didn't make it up, that's</p> <p>15 just the way it is in the federal sense, and it</p> <p>16 goes that way on the state. If you looked at</p> <p>17 all of our funding charts, you will see 75</p> <p>18 percent are mental health and 25 percent are</p> <p>19 addiction. So that's the first part.</p> <p>20 The second part is that during the</p> <p>21 last 15 years, there has been a greater</p> <p>22 reception to mental health, and -- but when the</p> <p>23 opioid crisis occurred, the state senate and</p> <p>24 legislature set up a 21-member committee to</p> <p>25 come around and testify -- or to get testimony</p>	<p style="text-align: right;">Page 148</p> <p>1 know why it's a stigma that people have, and it</p> <p>2 goes to how they were brought up and what they</p> <p>3 believe and so forth. So that's my answer.</p> <p>4 Q. Do you agree that the State of Ohio</p> <p>5 itself has some responsibility for the opioid</p> <p>6 abuse epidemic?</p> <p>7 MS. SACKS: Objection.</p> <p>8 A. I don't know. I don't know how to</p> <p>9 answer -- I don't know. The answer to that</p> <p>10 question, I don't know.</p> <p>11 Q. Why do you say you don't know?</p> <p>12 A. Because it's all of our</p> <p>13 responsibility and the people we elect. We all</p> <p>14 have a responsibility. And letting -- it's not</p> <p>15 just the state. It's everybody that's</p> <p>16 involved. So I don't know.</p> <p>17 I don't know if it's just the State</p> <p>18 of Ohio, and I have gone there to testify in a</p> <p>19 number of different ways, asking them for</p> <p>20 money, and I haven't been that successful, darn</p> <p>21 it. I wish I was. But it has not been one of</p> <p>22 the things that I could say, boy, I really did</p> <p>23 a great job on that. I wish I could say that.</p> <p>24 No, I haven't. Although --</p> <p>25 Q. You tried, right?</p>
<p style="text-align: right;">Page 147</p> <p>1 from across the state, and they appeared here</p> <p>2 at the one of the local hospitals to take</p> <p>3 testimony, and it was regarding funding like</p> <p>4 this.</p> <p>5 And one of the state legislatures</p> <p>6 said to me, "Mr. Denihan, you could talk to me</p> <p>7 about mental health, but you can't talk to me</p> <p>8 about addiction, when a person has a choice,"</p> <p>9 and did not understand it's a disease, and</p> <p>10 diseases are treatable. And so that's a person</p> <p>11 who makes decisions in the State of Ohio</p> <p>12 relative to funding, so that goes to part of</p> <p>13 your answer.</p> <p>14 There is a stigma involved in it</p> <p>15 that's been hard to break, and I don't</p> <p>16 understand why. To me, it's simple, that it is</p> <p>17 a disease, and diseases are treatable, and if</p> <p>18 you treat them, you save money.</p> <p>19 But I've learned that if I could</p> <p>20 give them a program that actually saves them</p> <p>21 money, they would be more receptive. And so</p> <p>22 that's when we talked about jail incarceration,</p> <p>23 treatment versus incarceration, stuff like</p> <p>24 that.</p> <p>25 So to answer your question, I don't</p>	<p style="text-align: right;">Page 149</p> <p>1 MS. SACKS: Objection.</p> <p>2 A. Well, when I started, the county</p> <p>3 was awarding \$14 million, and when I left, it</p> <p>4 went up to 30, more than doubled in my time</p> <p>5 period for the county locally. So that was</p> <p>6 good.</p> <p>7 But I can't say that about the</p> <p>8 state. The state has been a great</p> <p>9 disappointment, in terms of behavioral health</p> <p>10 funding, and so I don't understand why, but</p> <p>11 there it is.</p> <p>12 Q. We looked at a document earlier</p> <p>13 today, I think it was Exhibit 2, where at least</p> <p>14 one county council member, I think it was</p> <p>15 Mr. Gallagher --</p> <p>16 A. Mr. who?</p> <p>17 Q. Gallagher, Michael Gallagher.</p> <p>18 A. Can I see it?</p> <p>19 Q. Yeah. I don't know where your</p> <p>20 exhibits went. It is Exhibit 2.</p> <p>21 Do you remember we looked at this</p> <p>22 document?</p> <p>23 A. Yeah.</p> <p>24 Q. And counsel member Gallagher --</p> <p>25 A. Oh, Gallagher. I thought you said</p>

<p style="text-align: right;">Page 150</p> <p>1 something else.</p> <p>2 Q. Sorry. Maybe I wasn't pronouncing</p> <p>3 it just right.</p> <p>4 A. Gallagher.</p> <p>5 Q. Gallagher. We looked at a</p> <p>6 document, it was Exhibit 2, where Counsel</p> <p>7 Member Gallagher was also expressing reluctance</p> <p>8 about providing funding in response to the</p> <p>9 opioid epidemic, right?</p> <p>10 A. I don't know what that was about.</p> <p>11 Councilman Gallagher has since been a supporter</p> <p>12 of what we have been doing. And he was new</p> <p>13 then and we were new then, the county</p> <p>14 government was new then, and you go through</p> <p>15 fluctuations of things like that, and I'm not</p> <p>16 trying to make excuses for him, I'm just saying</p> <p>17 that that happens, and that can't be a</p> <p>18 reflection of everybody.</p> <p>19 Q. You indicated that there were times</p> <p>20 when the ADAMHS Board requested funding related</p> <p>21 to opioid addiction and, in some instances,</p> <p>22 those requests were granted and, in some</p> <p>23 instances, those requests were denied, right?</p> <p>24 A. I could say for my whole career, I</p> <p>25 could say that about everything I requested.</p>	<p style="text-align: right;">Page 152</p> <p>1 of opioid abuse?</p> <p>2 A. It's hard to answer something when</p> <p>3 you don't know why, why other people act the</p> <p>4 way they act. So I don't know if I could</p> <p>5 answer that, other than to tell you that they</p> <p>6 do, and we have responsibilities to carry out</p> <p>7 no matter how they act, and our job is to</p> <p>8 figure it out and overcome and try to do the</p> <p>9 best job we can. So how they do it and why</p> <p>10 they do it, I have no idea.</p> <p>11 Q. What is the stigma that you believe</p> <p>12 exists in the minds of public officials or the</p> <p>13 community overall, when it comes to</p> <p>14 substance-use disorders, including addiction to</p> <p>15 opioids?</p> <p>16 A. Well, I certainly would like to</p> <p>17 give that a lot of thought. I'll come back to</p> <p>18 you at a later date. I haven't thought about</p> <p>19 it. And, quite frankly, I don't know if I want</p> <p>20 to think about it. I'm retired now. I don't</p> <p>21 know. I wish that things were different in</p> <p>22 this country, but I don't know.</p> <p>23 All I know, it's worth the effort</p> <p>24 of trying to make a difference. I was around</p> <p>25 when drunk driving was an issue, and mothers</p>
<p style="text-align: right;">Page 151</p> <p>1 Some of it has been approved and some of it</p> <p>2 hasn't been approved. It's just that -- so to</p> <p>3 say just because it was opioids did not --</p> <p>4 wasn't the -- I don't -- the part of government</p> <p>5 and awarding contracts and budgets is you don't</p> <p>6 get everything that you request and ask for.</p> <p>7 That is a part of it.</p> <p>8 It's not to suggest it's not</p> <p>9 needed, it's just that their job is to award</p> <p>10 the money, and our job is to ensure that it is</p> <p>11 allocated correctly and that we are good</p> <p>12 stewards of the funds, and sometimes it doesn't</p> <p>13 work out that way. It doesn't work out that we</p> <p>14 get what we think we need.</p> <p>15 Q. To what extent would you say that</p> <p>16 local county officials share at least some</p> <p>17 responsibility for the opioid abuse epidemic in</p> <p>18 this community?</p> <p>19 MS. SACKS: Objection.</p> <p>20 A. I don't think -- I don't know.</p> <p>21 I've never -- I haven't given it a thought. I</p> <p>22 don't know.</p> <p>23 Q. You mentioned stigma as an issue.</p> <p>24 Can you just say a bit more about your view of</p> <p>25 why stigma and how stigma contributes to trends</p>	<p style="text-align: right;">Page 153</p> <p>1 and drunk driving made a difference, and the</p> <p>2 moms said, "We got to change things," and they</p> <p>3 did. They made a big difference in America,</p> <p>4 reducing drunk driving deaths in half.</p> <p>5 I see that advocacy taken up by</p> <p>6 families now. I don't know. All I know is it</p> <p>7 is a problem, and my career, I have been the</p> <p>8 resolver of problems with agencies and getting</p> <p>9 things done. My expertise hasn't been why it</p> <p>10 happened. My expertise has been getting</p> <p>11 something done and making them accountable.</p> <p>12 Q. When you talk about stigma though,</p> <p>13 I just want you to explain what you mean. What</p> <p>14 is the stigma that exists in terms of</p> <p>15 substance-use disorders and specifically</p> <p>16 opioid-use disorders?</p> <p>17 A. Well, it could mean many things to</p> <p>18 many people, and if we're talking about the</p> <p>19 general population, the general population may</p> <p>20 not even have an idea what's going on. A</p> <p>21 stigma is somebody reluctant to do something</p> <p>22 and accept something.</p> <p>23 In our advertisements, we try to</p> <p>24 make it clear that if somebody uses the opiate,</p> <p>25 no matter where it comes from, they could die,</p>

<p style="text-align: right;">Page 154</p> <p>1 and break down that stigma that they are 2 invincible. 3 Anyhow, I do not know if I could 4 answer that question what stigma is. The more 5 I think about it, the more I'm thinking that I 6 don't think I can answer that question. 7 Q. Okay. To what extent -- well, let 8 me back up for just one moment. 9 Do you recall that around 2008, 10 there was an economic downturn that is 11 sometimes referred to as the Great Recession? 12 A. Oh, yeah. I was around. I was 13 awake then. 14 Q. Yes. I think everybody in the room 15 would have been. 16 What is your understanding about 17 how the Great Recession impacted the financial 18 condition of Cuyahoga County? 19 MS. SACKS: Objection. 20 A. Well, I don't know how it impacted 21 Cuyahoga County. I don't know, because I was 22 concerned about the ADAMHS Board, which is 23 actually the mental health board at the point 24 in time, so... 25 Q. So I'll just point you to a bit of</p>	<p style="text-align: right;">Page 156</p> <p>1 impact of the Great Recession on levels of 2 substance-use disorders? 3 MS. SACKS: Objection. 4 A. I don't know if that's occurred or 5 not. 6 Q. Has the ADAMHS Board ever 7 undertaken that? 8 MS. SACKS: Objection. 9 A. No, I don't believe we have. 10 Q. Do you believe that the Great 11 Recession has been a contributing factor to 12 levels of opioid abuse in Cuyahoga County? 13 MS. SACKS: Objection. 14 A. I don't know. I don't know. 15 Q. You said here, to the Ohio 16 Senate -- 17 A. I know what I said, and I'm being 18 honest with you, I don't know. 19 Q. You said in 2011 that, "As people 20 continue to lose jobs and homes, many suffer 21 with depression and emotional strain and turn 22 to drugs and alcohol" -- 23 A. That's a true statement. 24 Q. -- "and they turn to drugs and 25 alcohol to cope --</p>
<p style="text-align: right;">Page 155</p> <p>1 your testimony to the Ohio State senate. 2 A. Yeah. 3 Q. On the last page, it's page -- it's 4 the page with 6541 on the bottom right-hand 5 corner -- 6 A. What do I say? 7 Q. Well, you make a reference to what 8 I think is the Great Recession, although you 9 can correct me if I'm misinterpreting. 10 A. You're probably right. 11 Q. Right in the middle of the page you 12 say, "Reduction in mental health and addiction 13 services are especially devastating as our 14 weakening economy truly has an impact on the 15 population's mental health;" do you see that? 16 A. Yeah. 17 Q. This is from 2011, yes? 18 A. Yes, sir. 19 Q. Is that in reference to the Great 20 Recession, when you talk about the weakening 21 economy? 22 A. I would imagine it is. 23 Q. Has the ADAMHS Board or anybody 24 else in Cuyahoga County, to your knowledge, 25 ever undertaken to try and understand the</p>	<p style="text-align: right;">Page 157</p> <p>1 A. Oh, yes, they do. 2 Q. -- "which leads to dependency." 3 A. Yes, they do. 4 Q. So is your view that the Great 5 Recession contributed to levels of opioid abuse 6 in Cuyahoga County? 7 MS. SACKS: Objection. 8 A. Well, it could, yes. 9 Q. To what extent do you believe that 10 the economic downturn that began around 2008 11 has contributed to opioid abuse in Cuyahoga 12 County? 13 A. I don't know. 14 MS. SACKS: Objection. 15 A. I don't know. What I do know is 16 that people lose jobs, lose homes, get sick, 17 and many of them get addicted. 18 Q. Does the Cuyahoga County ADAMHS 19 Board have its own designated levy? 20 MS. SACKS: Objection. 21 A. No. 22 Q. Has it ever? 23 MS. SACKS: Objection. 24 A. No. 25 MR. BOEHM: What's the basis of the</p>

<p style="text-align: right;">Page 158</p> <p>1 objection about whether or not the ADAMHS Board 2 has ever had its own levy? 3 MS. SACKS: I don't know if he's 4 making the connection between the two 5 questions. So can you put it together? 6 MR. BOEHM: There is no connection 7 between any question. 8 Q. My question is just one question, 9 and I think you answered it. 10 MS. SACKS: You said has it ever. 11 MR. BOEHM: First I asked does it 12 have its own levy, he said no, and then I said 13 has it ever, and he said no. 14 Q. Are those correct answers? 15 A. Correct answers. 16 Q. Has the Cuyahoga County ADAMHS 17 Board ever lobbied to get its own designated 18 levy? 19 A. Yes. 20 Q. What was the outcome of those 21 efforts? 22 A. It came within one vote of 23 happening. The year was -- I can't remember 24 the year, it was 12, 13 or 14, and it's up to 25 the vote of the county council, and there is 12</p>	<p style="text-align: right;">Page 160</p> <p>1 she would vote for it now, but it doesn't make 2 any difference. It had actually four votes 3 against it, and so we missed it by one, and I 4 was told, and that's where we're at. 5 Q. Has there ever been a renewed 6 effort to get an ADAMHS specific HHS -- I'm 7 sorry -- an ADAMHS specific levy in Cuyahoga 8 County? 9 A. There has been discussion, but no 10 action. 11 Q. Does the county executive have a 12 role in determining whether or not there should 13 be an ADAMHS designated levy? 14 A. Well, the final, it's not up to the 15 county executive. It is up to county council. 16 MR. BOEHM: Do you want to go off 17 the record for a minute. 18 THE VIDEOGRAPHER: Off the record 19 at 12:51. 20 (Recess taken.) 21 - - - - - 22 (Thereupon, Deposition Exhibit 6, 23 Designated Confidential, 4/10/2013 24 Email, Subject: Mental Health & 25 Addiction Levy Fact Sheet, with</p>
<p style="text-align: right;">Page 159</p> <p>1 members -- excuse me -- there is 11 members on 2 the council, and they needed a nine-member 3 vote, and Dan Brady was the champion of it, and 4 he got eight votes. 5 To pass a budget resolution, you 6 only needed seven, and six for approval, but 7 for a charter change, you need eight -- nine 8 rather, and it came that close. 9 So, yes, there was that effort, and 10 it did not happen. 11 Q. In what year was that effort? 12 A. I can't remember. 13 Q. By my math, that would mean that 14 three county council members did not vote in 15 favor of a designated ADAMHS levy? 16 A. Yes. 17 Q. Who were those three council 18 members? 19 A. They were Republicans, Greenspan, 20 Gallagher, and I can't remember the other one. 21 Actually, there were four votes 22 against it. There was that one Democrat voted 23 against it, and it was the woman on the east 24 side, and I can't remember her name. She is 25 from Highland Heights, who has said to me that</p>	<p style="text-align: right;">Page 161</p> <p>1 Attachment, Beginning with Bates 2 Label CUYAH 012357240, was marked 3 for purposes of identification.) 4 - - - - - 5 THE VIDEOGRAPHER: On the record, 6 1:34. 7 Q. Welcome back from lunch, 8 Mr. Denihan. 9 A. Oh, you're welcome. Thank you. 10 Q. I have placed in front of you a 11 document marked as Exhibit 6, which is an April 12 2013 email with an attachment that has to do 13 with efforts to pass an ADAMHS specific levy, 14 and we were talking about that before we broke 15 for lunch, right? 16 A. Right. 17 Q. Is this the period of time, 2013, 18 when efforts were undertaken to try and pass an 19 ADAMHS specific levy in Cuyahoga County? 20 A. Yes, yes. I know, I'm supposed to 21 speak up. 22 Q. Okay. No, that was great. Thank 23 you. 24 About a third of the way down the 25 first page of the attachment to this email,</p>

<p style="text-align: right;">Page 162</p> <p>1 there is a section that begins -- or that is</p> <p>2 titled Decreasing Funds. Do you see Decreasing</p> <p>3 Funds on the page?</p> <p>4 Do you want me to help you, point</p> <p>5 that out? Decreasing funds.</p> <p>6 A. Thank you.</p> <p>7 Q. You're welcome. And underneath the</p> <p>8 decreasing funds section of this document</p> <p>9 marked as Exhibit 6, there is an explanation of</p> <p>10 decreasing state funds and then decreasing</p> <p>11 county funds; do you see that?</p> <p>12 A. Yes.</p> <p>13 Q. Let's starts with the state</p> <p>14 decreasing funds. The document says that,</p> <p>15 "Since 2002, State General Revenue Funding for</p> <p>16 non-Medicaid alcohol, drug addiction and mental</p> <p>17 health prevention, treatment and support</p> <p>18 services has declined by \$140 million or 62.68</p> <p>19 percent." Did I read that correctly?</p> <p>20 A. Yes.</p> <p>21 Q. Do you know why State General</p> <p>22 Revenue Funding for drug addiction, mental</p> <p>23 health prevention and those other services had</p> <p>24 declined \$140 million between 2002 and 2013?</p> <p>25 A. It had something to do with the</p>	<p style="text-align: right;">Page 164</p> <p>1 to the ADAMHS Board been steadily declining</p> <p>2 between approximately 2003 and approximately</p> <p>3 2013?</p> <p>4 A. This is in reference to</p> <p>5 non-Medicaid funding, which seemed to be</p> <p>6 increasing at the same time also, and some of</p> <p>7 the areas -- not some of them, all of them that</p> <p>8 are bulleted there are those that are affected.</p> <p>9 Q. Did you say that some funding had</p> <p>10 been increasing to the ADAMHS Board between</p> <p>11 2003 and 2013?</p> <p>12 A. No, I didn't say that. I don't</p> <p>13 think I said that. I said that the --</p> <p>14 Q. Can you say it one more time.</p> <p>15 A. The non-Medicaid -- this impacted</p> <p>16 the non-Medicaid funding and which is not</p> <p>17 covered by Medicaid, those services, and these</p> <p>18 services are appropriate for that would be</p> <p>19 impacted by it.</p> <p>20 Q. If you read further along in this</p> <p>21 same paragraph where the county decreased</p> <p>22 funding, it indicates that although the ADAMHS</p> <p>23 Board has had a role in ensuring passage of the</p> <p>24 HHS levy in the county, that the board itself</p> <p>25 has received less and less funding, while other</p>
<p style="text-align: right;">Page 163</p> <p>1 Medicaid funding.</p> <p>2 Q. Do you know in what way Medicaid</p> <p>3 was related to this loss of funding?</p> <p>4 A. No, I don't. I don't recall, but</p> <p>5 it had something to do with it.</p> <p>6 Q. Did this loss of state funding of</p> <p>7 \$140 million impact the Cuyahoga County ADAMHS</p> <p>8 Board's ability to respond to trends of opioid</p> <p>9 abuse and overdose in the community?</p> <p>10 A. Yes.</p> <p>11 Q. How so?</p> <p>12 A. Well, it affects all of the funding</p> <p>13 of the ADAMHS Board that's included.</p> <p>14 Q. All right. Let's go to the next</p> <p>15 section here, which has to do with the county,</p> <p>16 and the county, of course, there is Cuyahoga</p> <p>17 County, right?</p> <p>18 A. Yes.</p> <p>19 Q. It say, "Funding from the Cuyahoga</p> <p>20 County Health and Human Services levy has also</p> <p>21 been steadily declining over the last ten</p> <p>22 years"; do you see that?</p> <p>23 A. Yes.</p> <p>24 Q. To what extent had funding from the</p> <p>25 Cuyahoga County Health and Human Service levy</p>	<p style="text-align: right;">Page 165</p> <p>1 county departments received increases, and</p> <p>2 programs that were funded by the County General</p> <p>3 Fund were moved under the Health and Human</p> <p>4 Services levy umbrella; do you see that?</p> <p>5 A. Yes, I do.</p> <p>6 Q. What is your understanding as to</p> <p>7 why the ADAMHS Board was receiving less and</p> <p>8 less funding from the county's HHS levy between</p> <p>9 approximately 2003 and 2013?</p> <p>10 A. I don't know. I could only explain</p> <p>11 to you that it happened, and I wasn't happy</p> <p>12 about it.</p> <p>13 Q. Whose decision was it to provide</p> <p>14 less and less funding to the ADAMHS Board</p> <p>15 between 2003 and 2013 and instead direct those</p> <p>16 moneys to other programs in the county?</p> <p>17 A. The county administration.</p> <p>18 Q. Would that be the county council,</p> <p>19 the county executive or both?</p> <p>20 A. Well, it's presented by the county</p> <p>21 administration and approved by the county</p> <p>22 council.</p> <p>23 Q. You said you weren't happy about</p> <p>24 the fact that this was happening over this</p> <p>25 approximately ten years. Why were you not</p>

<p style="text-align: right;">Page 166</p> <p>1 happy about that?</p> <p>2 A. Because instead of receiving a</p> <p>3 decrease in the number of individuals to serve,</p> <p>4 that had continued to increase.</p> <p>5 Q. Did the fact that the ADAMHS Board</p> <p>6 was receiving less and less funding from the</p> <p>7 county between approximately 2003 and 2013 have</p> <p>8 an impact on the ADAMHS Board's ability to</p> <p>9 respond to the problem of opioid abuse in the</p> <p>10 community?</p> <p>11 A. It affected everything we tried to</p> <p>12 serve, and that's included.</p> <p>13 - - - - -</p> <p>14 (Thereupon, Deposition Exhibit 7,</p> <p>15 Designated Confidential, May 2010</p> <p>16 Email, Subject: ODH Prescription for</p> <p>17 Prevention Initiative: Cuyahoga</p> <p>18 County Coalition, with Attachment,</p> <p>19 Beginning with Bates Label CUYAH</p> <p>20 012366210, was marked for purposes</p> <p>21 of identification.)</p> <p>22 - - - - -</p> <p>23 Q. Okay. We are moving right along.</p> <p>24 This is Exhibit 7.</p> <p>25 Mr. Denihan, this email exchange</p>	<p style="text-align: right;">Page 168</p> <p>1 A. Yes.</p> <p>2 Q. -- the document marked as Exhibit</p> <p>3 7?</p> <p>4 A. Yes.</p> <p>5 Q. Does this refresh your memory about</p> <p>6 communications you had with representatives of</p> <p>7 the Ohio Department of Health about</p> <p>8 prescription opioid abuse in and around May</p> <p>9 2010?</p> <p>10 A. No. I don't deny that I did</p> <p>11 receive it, I just don't remember.</p> <p>12 Q. You don't remember this specific</p> <p>13 correspondence?</p> <p>14 A. No.</p> <p>15 Q. Do you remember the Ohio Department</p> <p>16 of Health, in or around 2010, endeavoring to</p> <p>17 start initiatives to respond to trends of</p> <p>18 opioid abuse and overdose in the state?</p> <p>19 A. I remember something going on.</p> <p>20 Q. And that something that was going</p> <p>21 on had to do with abuse of prescription opioid</p> <p>22 drugs, correct?</p> <p>23 A. Apparently.</p> <p>24 Q. And that was in 2010?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 167</p> <p>1 takes us back to May 2010, and it is from</p> <p>2 somebody by the name of Jennifer Miltner; do</p> <p>3 you see that?</p> <p>4 A. Yes, I do.</p> <p>5 Q. And this email was written to you,</p> <p>6 right?</p> <p>7 A. Yes.</p> <p>8 Q. I'll give you a chance to look at</p> <p>9 the email, and my question to you is going to</p> <p>10 be: Does this refresh your memory about</p> <p>11 exchanges you had with individuals on behalf of</p> <p>12 the Ohio Department of Health in May 2010 about</p> <p>13 abuse of prescription opioid drugs in Ohio and</p> <p>14 in the county?</p> <p>15 A. Okay.</p> <p>16 Q. Have you had a chance to look this</p> <p>17 over?</p> <p>18 A. Yes, I did, the first page.</p> <p>19 Q. Would you like a moment to read the</p> <p>20 second page?</p> <p>21 A. I would like one, yeah.</p> <p>22 Q. Sure.</p> <p>23 A. Okay.</p> <p>24 Q. Mr. Denihan have you had a chance</p> <p>25 to review --</p>	<p style="text-align: right;">Page 169</p> <p>1 Q. And in this instance, Ms. Miltner</p> <p>2 reaches out to you directly. You are the only</p> <p>3 recipient of this email, right?</p> <p>4 A. Yes.</p> <p>5 Q. And do you see in the first line</p> <p>6 she says she is reaching out to you on behalf</p> <p>7 of the Ohio Department of Health?</p> <p>8 A. Yes.</p> <p>9 Q. And she describes an epidemic of</p> <p>10 prescription drug overdose and abuse in the</p> <p>11 state, right?</p> <p>12 A. Uh-huh.</p> <p>13 Q. Yes?</p> <p>14 A. Yeah. I'm sorry. Yes.</p> <p>15 Q. So there we see that term again</p> <p>16 "epidemic."</p> <p>17 A. Okay.</p> <p>18 MS. SACKS: Objection.</p> <p>19 Q. And in this instance, the word</p> <p>20 "epidemic" is being used in May 2010, right?</p> <p>21 A. Okay.</p> <p>22 Q. So do you agree, having seen this</p> <p>23 document, that the Ohio Department of Health</p> <p>24 was reaching out to you in May 2010 to address</p> <p>25 what it believed to be an epidemic of</p>

<p style="text-align: right;">Page 170</p> <p>1 prescription drug abuse and overdose?</p> <p>2 A. I don't understand the question.</p> <p>3 Q. Let me give it to you one more</p> <p>4 time. And you just let me know if you need a</p> <p>5 break at any moment.</p> <p>6 Do you agree, having looked at this</p> <p>7 document, that in May 2010, the Ohio Department</p> <p>8 of Health reached out to you because it</p> <p>9 believed that there was an epidemic of</p> <p>10 prescription opioid abuse taking place in Ohio?</p> <p>11 A. I believe that the attached</p> <p>12 memorandum, which mentions the epidemic of</p> <p>13 prescription drug overdose, was sent to me, and</p> <p>14 that they want to start something off.</p> <p>15 Q. And specifically, it says, in the</p> <p>16 second paragraph -- you have to look back at</p> <p>17 the first page, there you go. It says,</p> <p>18 "Because of your leadership as the chief</p> <p>19 executive officer of the ADAMHS Board of</p> <p>20 Cuyahoga County, you have a unique perspective</p> <p>21 on this issue;" do you see that?</p> <p>22 A. Yes, I do.</p> <p>23 Q. Do you agree that due to your</p> <p>24 leadership as the CEO of the ADAMHS Board for</p> <p>25 the county, you had a unique perspective on the</p>	<p style="text-align: right;">Page 172</p> <p>1 in Cuyahoga County to address this epidemic";</p> <p>2 do you see that, Mr. Denihan?</p> <p>3 A. I'm with you.</p> <p>4 Q. Did I read that correctly, that</p> <p>5 third paragraph?</p> <p>6 A. Yes. Yes, you did. What is the</p> <p>7 question?</p> <p>8 Q. I was just asking if you saw it and</p> <p>9 if I read that section correctly.</p> <p>10 A. Yes, you did.</p> <p>11 Q. So in 2010, Ms. Miltner, on behalf</p> <p>12 of the Ohio Department of Health, is indicating</p> <p>13 that she wants to work with you, the CEO of the</p> <p>14 ADAMHS Board, to address the opioid abuse</p> <p>15 epidemic in Cuyahoga County, correct?</p> <p>16 A. Yes. Yes.</p> <p>17 Q. Did you at -- let me start this</p> <p>18 question over.</p> <p>19 In or around May 2010, did you, as</p> <p>20 the CEO of the ADAMHS Board or as part of your</p> <p>21 involvement on the Cuyahoga County Opiate Task</p> <p>22 Force, undertake to try and understand the</p> <p>23 reasons why Cuyahoga County was experiencing</p> <p>24 worrisome trends in terms of the levels of</p> <p>25 opioid abuse and overdoses?</p>
<p style="text-align: right;">Page 171</p> <p>1 subject of prescription abuse and overdose in</p> <p>2 Cuyahoga County?</p> <p>3 A. I would agree that I'm not the only</p> <p>4 one that has this perspective.</p> <p>5 Q. Do you agree that you are one of</p> <p>6 the people who has that unique perspective?</p> <p>7 A. I think I'm one of the people, yes.</p> <p>8 Q. Who are the other people you would</p> <p>9 say have a unique perspective, particularly</p> <p>10 going back to May 2010 when this was written,</p> <p>11 on the subject of worrisome trends in terms of</p> <p>12 prescription abuse or overdose in Cuyahoga</p> <p>13 County, other than yourself?</p> <p>14 A. The county health department, city</p> <p>15 health department, the county medical examiner,</p> <p>16 I believe, would be -- would fit that</p> <p>17 accreditation.</p> <p>18 Q. And if you flip to the next page,</p> <p>19 which is the formal invitation to you on behalf</p> <p>20 of the Ohio Department of Health, do you see</p> <p>21 the third paragraph down is in bold print?</p> <p>22 A. Yes, I see it.</p> <p>23 Q. It says, "As you are an active and</p> <p>24 influential leader within your community, we</p> <p>25 would like to work with you in a local effort</p>	<p style="text-align: right;">Page 173</p> <p>1 A. No.</p> <p>2 Q. Why didn't you undertake to try to</p> <p>3 understand the causes?</p> <p>4 A. I don't know if I had the clinical</p> <p>5 research background to do that.</p> <p>6 Q. Well, isn't it true that the ADAMHS</p> <p>7 Board has scientists and medical doctors who</p> <p>8 consult with the board?</p> <p>9 A. They do, but they're tied up doing</p> <p>10 clinical work.</p> <p>11 Q. Do you, as the CEO of the ADAMHS</p> <p>12 Board, ever ask any of the consultants or</p> <p>13 employees who had scientific and medical</p> <p>14 expertise to try and investigate and understand</p> <p>15 the causes of opioid abuse trends and overdose</p> <p>16 trends in the county?</p> <p>17 A. I don't recall.</p> <p>18 Q. Do you recall that in this same</p> <p>19 timeframe, 2010, then Governor Strickland had</p> <p>20 established a Prescription Drug Abuse Task</p> <p>21 Force?</p> <p>22 A. Yes.</p> <p>23 Q. Do you recall that the Ohio</p> <p>24 Prescription Drug Abuse Task Force that had</p> <p>25 been established by Governor Strickland issued</p>

<p style="text-align: right;">Page 174</p> <p>1 a final report?</p> <p>2 A. Okay.</p> <p>3 Q. Do you remember that?</p> <p>4 A. I don't remember the final report,</p> <p>5 but go ahead.</p> <p>6 Q. Is that something that you would</p> <p>7 have read at the time? I know it's been some</p> <p>8 years, but would you have read that report at</p> <p>9 the time?</p> <p>10 A. I may I have.</p> <p>11 Q. You can set that one aside. Thank</p> <p>12 you, Mr. Denihan.</p> <p>13 - - - - -</p> <p>14 (Thereupon, Deposition Exhibit 8,</p> <p>15 Designated Confidential, 4/27/2010</p> <p>16 Email, Subject: Several Things, with</p> <p>17 Attachment, Beginning with Bates</p> <p>18 Label CUYAH 012367618, was marked</p> <p>19 for purposes of identification.)</p> <p>20 - - - - -</p> <p>21 Q. This is going to be Exhibit Number</p> <p>22 8. This also is 2010. In fact, this one is</p> <p>23 from April 2010. It is an email from.</p> <p>24 Ms. Cheri Walter, and you talked</p> <p>25 little bit about her earlier today; do you</p>	<p style="text-align: right;">Page 176</p> <p>1 A. Yes.</p> <p>2 Q. Did your duties change when you</p> <p>3 became the president, as opposed to your role</p> <p>4 as the president elect?</p> <p>5 A. They were somewhat different, yes.</p> <p>6 Q. How so?</p> <p>7 A. Well, president elect was -- there</p> <p>8 was a president in place while a president</p> <p>9 elect was there. So it's a question of who ran</p> <p>10 the meetings.</p> <p>11 Q. Do you recall during your time as</p> <p>12 president elect and president of the OACBHA</p> <p>13 addressing issues related to opioid abuse and</p> <p>14 overdose in Cuyahoga County and other parts of</p> <p>15 the state?</p> <p>16 A. Yes.</p> <p>17 Q. And, in fact, if you look to the</p> <p>18 second page of the document marked as Exhibit</p> <p>19 8, in April 2010, about three-quarters of the</p> <p>20 way down the page, do you see where it says</p> <p>21 Governor's Prescription Drug Abuse Task Force?</p> <p>22 A. Right.</p> <p>23 Q. And it indicates that the minutes</p> <p>24 from that meeting are attached for all of the</p> <p>25 recipients?</p>
<p style="text-align: right;">Page 175</p> <p>1 recall that?</p> <p>2 A. Yes.</p> <p>3 Q. She sent this email to you and to</p> <p>4 other individuals. The subject is Several</p> <p>5 Things, and if you look at the document, the</p> <p>6 first of those several things is an indication</p> <p>7 that you are the president elect of the OACBHA,</p> <p>8 right?</p> <p>9 A. Correct.</p> <p>10 Q. Would you remind us of what that</p> <p>11 acronym stands for OACBHA?</p> <p>12 A. Ohio Association of County</p> <p>13 Behavioral Health Authorities.</p> <p>14 Q. What were your responsibilities as</p> <p>15 the president elect of that organization?</p> <p>16 A. To work with an executive committee</p> <p>17 and conduct meetings on a range of issues that</p> <p>18 is facing our members.</p> <p>19 Q. And the fact that you were</p> <p>20 president elect suggestions that you at some</p> <p>21 point became the president; is that fair?</p> <p>22 A. Yes.</p> <p>23 Q. And in 2010 you were the president</p> <p>24 elect. Did you become the president of the</p> <p>25 OACBHA in 2011?</p>	<p style="text-align: right;">Page 177</p> <p>1 A. Okay.</p> <p>2 Q. Do you see that?</p> <p>3 A. Yes.</p> <p>4 Q. And that's related to concerns</p> <p>5 about opioid abuse and overdose during that</p> <p>6 timeframe, right?</p> <p>7 MS. SACKS: Objection.</p> <p>8 A. Right.</p> <p>9 Q. Okay. You can set that document</p> <p>10 aside.</p> <p>11 - - - - -</p> <p>12 (Thereupon, Deposition Exhibit 9,</p> <p>13 Designated Confidential, 2/12/2007</p> <p>14 Email, Forward: Executive Update,</p> <p>15 with Attachment, Beginning with</p> <p>16 Bates Label CUYAH 012875387, was</p> <p>17 marked for purposes of</p> <p>18 identification.)</p> <p>19 - - - - -</p> <p>20 Q. The document in front of you now</p> <p>21 has been marked as Exhibit 9 for purposes of</p> <p>22 your deposition here today, and I'll give you a</p> <p>23 moment to kind of flip through it, but for the</p> <p>24 record, it is an email that you sent to a group</p> <p>25 of people forwarding along information that had</p>

<p style="text-align: right;">Page 178</p> <p>1 been provided to you in February 2007 by</p> <p>2 somebody by the name of Marilee Oldfield; do</p> <p>3 you see that?</p> <p>4 A. Yes, I do.</p> <p>5 Q. Who is Marilee Oldfield?</p> <p>6 A. I do not know who she is.</p> <p>7 Q. It looks like she is also with the</p> <p>8 OACBHA organization, right?</p> <p>9 A. Okay.</p> <p>10 Q. Do you see that in her email?</p> <p>11 A. I see that, yeah. I don't know who</p> <p>12 she is though.</p> <p>13 Q. The attachment to this document</p> <p>14 that was produced to us by the lawyers in this</p> <p>15 case is entitled Opiate Pharmacotherapy White</p> <p>16 Paper, January 2007, and it has been authored</p> <p>17 on behalf of the Ohio Association of County</p> <p>18 Behavioral Health Authorities; do you see that?</p> <p>19 A. Yes.</p> <p>20 Q. Do you recall having received in or</p> <p>21 around February 2007 an opiate pharmacotherapy</p> <p>22 white paper through the OACBHA?</p> <p>23 A. No, I don't recall receiving it.</p> <p>24 Just for the record, I received</p> <p>25 hundreds, literally hundreds of hard copies and</p>	<p style="text-align: right;">Page 180</p> <p>1 DAWN Report; do you see all that?</p> <p>2 A. Yes.</p> <p>3 Q. Did I read all that correctly?</p> <p>4 A. Yes, you did.</p> <p>5 Q. So you knew in February 2007 that</p> <p>6 there was an escalation of individuals in the</p> <p>7 community who were addicted to prescription</p> <p>8 opioid medications, correct?</p> <p>9 A. Yes.</p> <p>10 Q. And you knew that prescription</p> <p>11 opioid medications had been implicated in drug</p> <p>12 abuse-related emergency room visits at least by</p> <p>13 February 2007 as well, correct?</p> <p>14 A. Yes.</p> <p>15 Q. The last bullet point in that</p> <p>16 section reads, "The opiate epidemic is creating</p> <p>17 additional burdens on this already taxed</p> <p>18 system"; do you see that?</p> <p>19 A. Yes, I do.</p> <p>20 Q. So in February 2007, you received a</p> <p>21 document that described trends of opioid</p> <p>22 addiction and overdose as an epidemic, correct?</p> <p>23 A. Uh-huh.</p> <p>24 Q. Yes?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 179</p> <p>1 emails. This is, unfortunately, part of that.</p> <p>2 Q. Yeah. The world we live in today.</p> <p>3 A. That's true.</p> <p>4 Q. I want to direct your attention in</p> <p>5 particular to pages 5 and 6 of the attachment.</p> <p>6 It is a section entitled The Current Opiate</p> <p>7 Problem.</p> <p>8 A. Okay.</p> <p>9 Q. Do you see that?</p> <p>10 A. Uh-huh.</p> <p>11 Q. This section of the document, as</p> <p>12 you can see, tries to describe the nature of</p> <p>13 the opioid problem that was occurring in Ohio</p> <p>14 at this time, right?</p> <p>15 A. Yes.</p> <p>16 Q. And if you go on to page 6, the</p> <p>17 second bullet point on page 6 says, "There has</p> <p>18 been an escalation of individuals addicted to</p> <p>19 prescription opiate analgesics, OxyContin,</p> <p>20 Demerol, Percodan, Vicodin, et cetera."</p> <p>21 And then skipping down a little</p> <p>22 bit, it says, "Pain medications implicated in</p> <p>23 drug abuse-related emergency room visits rose</p> <p>24 20 percent in 2002. A large portion of these</p> <p>25 involved oxycodone," and then it references the</p>	<p style="text-align: right;">Page 181</p> <p>1 Q. Do you agree that as of February</p> <p>2 2007, at least by that date, it was appropriate</p> <p>3 to refer to trends in opiate and opioid-related</p> <p>4 overdose and abuse as an epidemic?</p> <p>5 MS. SACKS: Objection.</p> <p>6 A. So I don't know if I'm qualified to</p> <p>7 agree. I don't know how to answer that,</p> <p>8 candidly. I don't know if I'm qualified at</p> <p>9 that point, 2007. My expertise and area was</p> <p>10 mental health, and we had yet to consolidate</p> <p>11 with the alcohol and drug board.</p> <p>12 Q. In any event, whether it</p> <p>13 technically would qualify under epidemiological</p> <p>14 standards as an epidemic, you knew that as of</p> <p>15 February 2007, people in Ohio and Cuyahoga</p> <p>16 County were referring to trends of opioid abuse</p> <p>17 and overdose in the county as an epidemic,</p> <p>18 correct?</p> <p>19 A. I would say that's correct.</p> <p>20 Somebody in our field was saying it, yes.</p> <p>21 Q. We're making good time.</p> <p>22 A. Well, I'm glad to hear that.</p> <p>23 - - - - -</p> <p>24 (Thereupon, Deposition Exhibit 10,</p> <p>25 Designated Confidential, 1/17/2013</p>

<p style="text-align: right;">Page 182</p> <p>1 Email, Forward: Several</p> <p>2 Things/Updates, with Attachment,</p> <p>3 Beginning with Bates Label CUYAH</p> <p>4 012549313, was marked for purposes</p> <p>5 of identification.)</p> <p>6 - - - - -</p> <p>7 Q. I've given you a document that I've</p> <p>8 marked as Exhibit 10. This one is from October</p> <p>9 2013, and it is again from the OACBHA,</p> <p>10 specifically Ms. Walter; do you see that?</p> <p>11 A. Yes, I do.</p> <p>12 Q. And if you turn to page 2 of this</p> <p>13 document, you will see that Ms. Walter has</p> <p>14 forwarded to the membership of the OACBHA</p> <p>15 information about a Prescription Drug Addiction</p> <p>16 and Healthcare Reform Study and a committee</p> <p>17 press conference.</p> <p>18 MS. SACKS: What page are you on?</p> <p>19 MR. BOEHM: I'm on the second page</p> <p>20 of the document. It is about three-quarters of</p> <p>21 the way down the page.</p> <p>22 MS. SACKS: Okay.</p> <p>23 Q. Do you see that, Mr. Denihan?</p> <p>24 A. Yes, I do. Yeah.</p> <p>25 Q. And this section makes reference to</p>	<p style="text-align: right;">Page 184</p> <p>1 Q. Okay.</p> <p>2 A. And I got to know him through the</p> <p>3 discussions of funding for the whole opioid</p> <p>4 experience.</p> <p>5 Q. Do you remember when you first</p> <p>6 spoke with Representative Sprague about opioid</p> <p>7 abuse in Cuyahoga County?</p> <p>8 A. No, but it had to be at a time when</p> <p>9 he was conducting a hearing, and I either</p> <p>10 testified on behalf of the county or the</p> <p>11 association, or a meeting after that particular</p> <p>12 point in time on the same day.</p> <p>13 Q. Well, let's look at the attachment</p> <p>14 to this particular email, which may be what you</p> <p>15 are talking about, but you tell me.</p> <p>16 This is an Ohio House of</p> <p>17 Representatives Prescription Drug Addiction and</p> <p>18 Healthcare Reform Legislative Study Committee</p> <p>19 from October 2013; do you see that?</p> <p>20 A. Yes, I do.</p> <p>21 Q. It looks like Representative Robert</p> <p>22 Sprague was the chair of this committee, right?</p> <p>23 A. Correct.</p> <p>24 Q. I want to direct your attention in</p> <p>25 particular to page 6 of this document. It is</p>
<p style="text-align: right;">Page 183</p> <p>1 a committee at the Ohio General Assembly that</p> <p>2 has members including Nan Baker and</p> <p>3 Representative Robert Sprague?</p> <p>4 A. Sprague, yes.</p> <p>5 Q. Let's start with Representative</p> <p>6 Baker. Do you know Representative Baker?</p> <p>7 A. Yes.</p> <p>8 Q. Have you ever communicated with</p> <p>9 Representative Baker about any subjects related</p> <p>10 to opioid abuse?</p> <p>11 A. Yes.</p> <p>12 Q. Can you please tell us about that?</p> <p>13 A. I don't recall the specific time,</p> <p>14 but a general discussion, in terms of advocacy</p> <p>15 work with the general assembly.</p> <p>16 Q. Is Representative Baker from</p> <p>17 Cuyahoga County?</p> <p>18 A. Yes, she is.</p> <p>19 Q. Do you know Representative Robert</p> <p>20 Sprague?</p> <p>21 A. Yes, I do.</p> <p>22 Q. In what way do you know</p> <p>23 Representative Sprague?</p> <p>24 A. He was the chair of the opioid</p> <p>25 committee and the general assembly.</p>	<p style="text-align: right;">Page 185</p> <p>1 Roman numeral III, and the section is entitled</p> <p>2 A State-Sponsored Problem; do you see that?</p> <p>3 A. Yes, I do.</p> <p>4 Q. I'll give you just a chance to look</p> <p>5 that over. I'm going to have a few questions</p> <p>6 for you.</p> <p>7 A. I've read it.</p> <p>8 MS. SACKS: You read the whole</p> <p>9 thing?</p> <p>10 THE WITNESS: Section number III.</p> <p>11 Q. The section --</p> <p>12 MS. SACKS: Read the whole section.</p> <p>13 THE WITNESS: Okay. Thank you.</p> <p>14 A. Okay.</p> <p>15 Q. You have had a chance to read</p> <p>16 through section III of this 2013 report?</p> <p>17 A. Uh-huh. Yes.</p> <p>18 Q. I want to direct your attention to</p> <p>19 some of the specifics in this section. The</p> <p>20 first point that Representative Sprague and his</p> <p>21 committee makes, under the section A</p> <p>22 State-Sponsored Problem, is that the general</p> <p>23 assembly of Ohio passed an act of legislation</p> <p>24 referred to as the Intractable Pain Act of</p> <p>25 1998, correct?</p>

<p style="text-align: right;">Page 186</p> <p>1 A. Yes. That's what it says.</p> <p>2 Q. What is the Intractable Pain Act of</p> <p>3 1998?</p> <p>4 A. I don't know.</p> <p>5 Q. Have you ever heard of that before?</p> <p>6 A. Not recently.</p> <p>7 Q. Well, what about at some point in</p> <p>8 time?</p> <p>9 A. It does not ring a bell.</p> <p>10 Q. Are you aware that prescribing</p> <p>11 guidelines were changed in connection with the</p> <p>12 use of prescription opioid medications in the</p> <p>13 late 1990s?</p> <p>14 A. I was not aware of it.</p> <p>15 Q. If I were to show you documents</p> <p>16 where you yourself have talked about that,</p> <p>17 would that come as a surprise to you?</p> <p>18 MS. SACKS: Objection.</p> <p>19 A. Everything is coming as a surprise</p> <p>20 to me today.</p> <p>21 Q. Well, I hope not.</p> <p>22 Let me ask you, and then we can</p> <p>23 look at your documents.</p> <p>24 A. Okay.</p> <p>25 Q. Does it -- do you agree that there</p>	<p style="text-align: right;">Page 188</p> <p>1 way in which changes in prescribing guidelines</p> <p>2 for prescription opioid medications impacted</p> <p>3 levels of opioid abuse or overdose in this</p> <p>4 community?</p> <p>5 A. I don't know if I could recite</p> <p>6 specifically. All I know is something</p> <p>7 happened, and folks in the medical field are</p> <p>8 concerned, and the end result is more people</p> <p>9 dying.</p> <p>10 Q. So let's see if we can break that</p> <p>11 down just a little bit.</p> <p>12 A. Well, you asked me.</p> <p>13 Q. You said, "Folks in the medical</p> <p>14 field are concerned."</p> <p>15 A. Somebody, the general assembly,</p> <p>16 medical field, everybody shared with me has</p> <p>17 shared a concern, and they all have done</p> <p>18 something to it. Here is the general assembly</p> <p>19 passing an Intractable Pain Act.</p> <p>20 By the way, this doesn't</p> <p>21 come -- this comes from, many times, from the</p> <p>22 medical community themselves.</p> <p>23 Q. What do you mean by that?</p> <p>24 A. When legislation is enacted, many</p> <p>25 times it comes at the testimony and advice of</p>
<p style="text-align: right;">Page 187</p> <p>1 were changes in guidelines for the use of</p> <p>2 prescribed prescription opioid medications in</p> <p>3 the 1990s?</p> <p>4 A. Yes.</p> <p>5 Q. And it says here, in connection</p> <p>6 with this piece of legislation from the Ohio</p> <p>7 legislature that it, quote, Opened the</p> <p>8 floodgates for doctors to treat chronic pain</p> <p>9 with prescription opioids; do you see that?</p> <p>10 A. I see that.</p> <p>11 Q. What is your understanding about</p> <p>12 how changes in the guidelines for using</p> <p>13 prescription opioids opened the floodgates, to</p> <p>14 use the terminology from this report, or in</p> <p>15 other words, impacted opioid abuse and overdose</p> <p>16 in Cuyahoga County?</p> <p>17 A. I don't think I'm qualified to</p> <p>18 answer that.</p> <p>19 Q. Well, you may not be a medical</p> <p>20 doctor, but I'm asking you, based on your</p> <p>21 leadership as the CEO of the ADAMHS Board in</p> <p>22 Cuyahoga County for many years, and as an</p> <p>23 active partner on the Cuyahoga Opiate Task</p> <p>24 Force that we have talked about, in that</p> <p>25 capacity, what is your understanding as to the</p>	<p style="text-align: right;">Page 189</p> <p>1 the practitioner. It's not passed in a vacuum.</p> <p>2 Q. Do you agree that in the late</p> <p>3 1990s, there was a consensus in the medical</p> <p>4 community at that time that pain was</p> <p>5 undertreated?</p> <p>6 A. No, I have no idea to say whether</p> <p>7 it was or it wasn't.</p> <p>8 Q. What is your understanding as to</p> <p>9 why prescribing guidelines were changed with</p> <p>10 respect to the use of prescription opioid</p> <p>11 medications in the 1990s?</p> <p>12 A. I don't know if I could answer the</p> <p>13 1990s or today. I don't know if I have the</p> <p>14 background to do that. So show me what the</p> <p>15 next document is.</p> <p>16 Q. Oh, no. With we're still working</p> <p>17 on this one.</p> <p>18 A. Okay.</p> <p>19 Q. The second number here in section</p> <p>20 III of this document indicates, and this is a</p> <p>21 document you received in 2013, says that, "The</p> <p>22 Ohio Medical Board and others throughout the</p> <p>23 country convinced the medical community to</p> <p>24 adopt pain as the fifth vital sign, putting</p> <p>25 pain on the same level as blood pressure, heart</p>

Page 190

1 rate, breathing rate and temperature, which
 2 effectively began an overt effort for doctors
 3 to treat all kinds and amounts of pain with
 4 opioids"; do you see that?
 5 A. I see that.
 6 Q. Is that consistent with your
 7 understanding, as the --
 8 A. Actually, yes.
 9 Q. And what is your understanding
 10 about that, as it concerns Cuyahoga County?
 11 A. My understanding and concern is a
 12 nurse or a doctor would come in, quite
 13 frequently during the day and time when a
 14 person is in treatment or in the hospital, and
 15 ask them, "What's your pain level," and somehow
 16 this is related to somebody saying, "Well, it's
 17 no longer a 5 or a 6 or whatever, it's higher,"
 18 and that, as this statement suggests,
 19 contributed to more pain prescriptions.
 20 Q. Do you know why the Ohio Medical
 21 Board and others throughout the country
 22 convinced the medical community to adopt the
 23 treatment of pain as a fifth vital sign?
 24 A. I don't know what it was, but it
 25 could be -- I don't know. Actually, I don't

Page 191

1 know.
 2 Q. Do you know if the Ohio Medical
 3 Board has ever revised its guidelines to
 4 prescribers in the State of Ohio for how they
 5 treat pain and how they use prescription opioid
 6 medications?
 7 A. I do know that going into a
 8 hospital myself, that the number of times they
 9 come in to ask me if I had pain had increased
 10 significantly as a result of this.
 11 Q. During this timeframe?
 12 A. Yes.
 13 Q. Do you have a view that the changes
 14 that you are referring to now, in terms of the
 15 use of prescription opioids and the treatment
 16 of pain as a fifth vital sign, contributed
 17 ultimately to the levels of opioid abuse and
 18 overdoses that have taken place here in
 19 Cuyahoga County?
 20 A. I don't know.
 21 Q. You don't know whether it has been
 22 a contributing factor or not?
 23 A. Well, I think it could -- upon
 24 reflection, I think it could play a
 25 contributing factor. I think it could.

Page 192

1 Q. And indeed Representative Sprague
 2 and his colleagues at the Ohio legislature are
 3 trying to describe several contributing
 4 factors.
 5 A. Right.
 6 Q. That's actually the language they
 7 use, right?
 8 A. Correct.
 9 Q. And you agree with their
 10 assessment?
 11 A. Well, yes, I do.
 12 Q. Number 3 states that, "In the late
 13 1990s, the FDA approved several new and
 14 powerful opioid pain medications with
 15 hydrocodone as the active ingredient, a very
 16 powerful and addictive opioid"; do you see
 17 that?
 18 A. Yes, I do.
 19 Q. Do you believe that the FDA's
 20 approval of new opioid prescription pain
 21 medication was a contributing factor to opioid
 22 abuse and overdose in this community?
 23 A. If the FDA says -- has approved it,
 24 and I'm inclined to agree with it, yes.
 25 Q. You are inclined to agree with the

Page 193

1 FDA, or you are inclined to agree that that is
 2 a contributing factor?
 3 A. That it is a contributing factor.
 4 Q. To what extent do you believe the
 5 United States Food and Drug Administration has
 6 responsibility for the opioid abuse epidemic?
 7 MS. SACKS: Objection.
 8 A. I don't know.
 9 Q. Do you believe they have any
 10 responsibility?
 11 A. I don't know. I'm not a
 12 clinician, I'm not a doctor, I don't know.
 13 Q. Well, again, I'm not asking you as
 14 a clinician or doctor. I'm asking you as an
 15 active partner on the Cuyahoga County Opiate
 16 Task Force and the CEO of the ADAMHS Board. So
 17 it's only in that capacity that I'm asking you
 18 these questions; does that make sense?
 19 A. I wish it did make sense, but to
 20 me, the limit of my capability to assess a
 21 value of a clinical diagnosis is something that
 22 I'm not trained for.
 23 Q. When you say the, "Value of a
 24 clinical diagnosis," can you tell me what you
 25 mean by that?

<p style="text-align: right;">Page 194</p> <p>1 A. Well, I look at these questions as 2 to whether I have the ability to -- I could 3 agree with every one of them, saying, well, the 4 general assembly looked at it, and I agree with 5 the committee, what they have done, and I do 6 agree with the committee, what they have done, 7 but if I have to sit here and quantify by my 8 background at what that actually means, I don't 9 think I'm capable of doing it. 10 And that's what I'm getting from 11 your questions. That's what I'm getting from 12 it. That may not be what you're saying, but 13 that's what I'm getting from it. 14 Q. In other words, are you saying that 15 it's not possible for you to, when you take all 16 the contributing factors to the opioid abuse 17 epidemic in Cuyahoga County, it's not possible 18 for you to try and figure out exactly or even 19 approximately which factors contributed which 20 amount; is that what you are saying? 21 A. I think that's part of what I'm 22 saying, that I think there are many factors 23 that contributed to it, and yeah. 24 Q. Is it possible for you, as somebody 25 who has been an active partner on the Cuyahoga</p>	<p style="text-align: right;">Page 196</p> <p>1 with the many demands of the job in the first 2 place. 3 Q. Right, but my question is different 4 than that. 5 A. Oh, okay. 6 Q. I understand you are saying you 7 don't believe you ever did it, but my -- and I 8 understand that you are not a medical doctor, 9 but you are the longtime CEO of the ADAMHS 10 Board, and you were an active partner on the 11 Cuyahoga County Opiate Task Force, and so one 12 of the things we are trying to do here is get 13 your knowledge, from having had that long 14 record of experience and having studied the 15 problem, having tried to understand the 16 problem, and having tried to address the 17 problem in this community. 18 A. And you want me -- 19 MS. SACKS: Hold on. Hold on. He 20 didn't ask a question. He just gave you a 21 statement. 22 Q. So my question -- 23 MR. BOEHM: That's appropriate. 24 That's fine. 25 MS. SACKS: Yeah.</p>
<p style="text-align: right;">Page 195</p> <p>1 County Opiate Task Force and the CEO of the 2 ADAMHS Board, to take all those factors into 3 account and try and assign approximately how 4 much each of those factors has contributed to 5 the epidemic in this community? 6 A. I'm not so sure that's what my job 7 is. My job is to provide services and 8 provide -- a good steward of the funding, and 9 ensure that folks get the services. 10 Q. But whether it's your job or not, 11 I'm just asking you the question whether or not 12 you believe that would be possible to do? 13 A. I don't think so. 14 Q. Why wouldn't that be possible? 15 A. Well -- 16 MS. SACKS: Objection. 17 A. -- I'm not a doctor, I'm not a 18 clinician, and I'm not an attorney. I'm an 19 administrator, responsible for the distribution 20 of state and county funding for individuals who 21 have one of these illnesses, and I don't think 22 that includes what you just described. 23 Q. Okay. 24 A. And I also didn't think -- I never 25 had the time to do that, while trying to deal</p>	<p style="text-align: right;">Page 197</p> <p>1 Q. So my question is, with that 2 background, with that explanation, my question 3 to you is whether or not you believe it is 4 possible, having looked this issue in Cuyahoga 5 County, to take all the various contributing 6 factors that we have talked about, some that we 7 will talk about, and try and figure out which 8 contributed in which amount; is that possible? 9 A. I don't know. I would like to 10 think about that question for a minute or two. 11 Q. Okay. 12 A. See if I understand the question. 13 Is it possible for me to -- repeat the question 14 for me again. 15 Q. Do you believe that it is possible 16 to take all of the various contributing factors 17 to the opioid abuse epidemic in Cuyahoga County 18 and then try and assess which factors 19 contributed and to which extent each factor 20 contributed to the opioid abuse problem here in 21 this community? 22 A. I think it's possible. 23 Q. Okay. And how would you go about 24 doing that? 25 A. I have no idea.</p>

<p style="text-align: right;">Page 198</p> <p>1 Q. So why do you say it's possible?</p> <p>2 A. Well, you put out all the</p> <p>3 contributing factors, and if they are true</p> <p>4 contributing factors, then somebody ought to</p> <p>5 have the ability to take those and make that</p> <p>6 decision, and if you ask me I thought it was</p> <p>7 possible, yeah, I think it's possible.</p> <p>8 Q. Did anybody at the ADAMHS Board</p> <p>9 ever try and do that?</p> <p>10 A. Not to my knowledge.</p> <p>11 Q. Did anybody at the Cuyahoga County</p> <p>12 Opiate Task Force ever try and do that?</p> <p>13 A. Not to my knowledge.</p> <p>14 Q. Why not?</p> <p>15 A. Well, I think I'll speak for</p> <p>16 myself, that we were too busy trying to stay a</p> <p>17 step ahead of those that were getting sick and</p> <p>18 dying.</p> <p>19 Q. But we talked about this earlier,</p> <p>20 Mr. Denihan, and I want to go back it to.</p> <p>21 You agreed, when I asked you</p> <p>22 earlier today, that in order to be able to</p> <p>23 really be effective in addressing a public</p> <p>24 health crisis, it is important to know why that</p> <p>25 crisis is happening, and you agreed with that</p>	<p style="text-align: right;">Page 200</p> <p>1 in a community, to understand the reasons why</p> <p>2 that those trends are taking place?</p> <p>3 A. I think eventually, yes, it is.</p> <p>4 Q. And that's what Representative</p> <p>5 Sprague was trying to do here, right, trying to</p> <p>6 understand the contributing factors?</p> <p>7 MS. SACKS: Objection.</p> <p>8 Q. Yes?</p> <p>9 A. I would -- on the surface, yes, it</p> <p>10 looks that way.</p> <p>11 Q. And is there anything among the</p> <p>12 contributing factors that Representative</p> <p>13 Sprague has identified here in section three --</p> <p>14 A. As a what?</p> <p>15 Q. Is there any contributing factor</p> <p>16 that Representative Sprague and his colleagues</p> <p>17 for the Ohio Prescription Drug Addiction Study</p> <p>18 Committee has concluded in terms of</p> <p>19 contributing factors that you disagree with,</p> <p>20 insofar as it concerns Cuyahoga County?</p> <p>21 A. No.</p> <p>22 Q. Do you agree that all of the</p> <p>23 factors that are identified by Representative</p> <p>24 Sprague and his colleagues --</p> <p>25 A. I think that is that --</p>
<p style="text-align: right;">Page 199</p> <p>1 statement. So my question to you now --</p> <p>2 A. I don't disagree with that</p> <p>3 statement. Okay. I'm sorry.</p> <p>4 Q. Do you agree that in order to be</p> <p>5 able to properly and appropriately and</p> <p>6 effectively address the trends of opioid abuse</p> <p>7 and overdose in Cuyahoga County, it is</p> <p>8 imperative to understand the reasons why the</p> <p>9 crisis is taking place?</p> <p>10 A. I think I would like to know why,</p> <p>11 yeah.</p> <p>12 Q. You think it is imperative, in</p> <p>13 order to be able to effectively address the</p> <p>14 crisis, to know why the crisis is taking place?</p> <p>15 A. To provide treatment for a person</p> <p>16 who needs help, I don't know if I need to know</p> <p>17 how the crisis began.</p> <p>18 Q. Respectfully, not my question.</p> <p>19 A. I know, but that's how I'm</p> <p>20 answering it.</p> <p>21 Q. But I get to ask my question, and</p> <p>22 then it only works if you answer my question.</p> <p>23 Do you think it is imperative, in</p> <p>24 order to understand how best to respond and</p> <p>25 address the trends of opioid abuse and overdose</p>	<p style="text-align: right;">Page 201</p> <p>1 MS. SACKS: Wait until he's done</p> <p>2 with his question.</p> <p>3 THE WITNESS: I'm sorry.</p> <p>4 MS. SACKS: That's okay.</p> <p>5 Q. Did you agree that all of the</p> <p>6 factors that were identified in this October</p> <p>7 2013 report by Representative Sprague and his</p> <p>8 colleagues were and have been contributing</p> <p>9 factors to the opioid abuse epidemic in</p> <p>10 Cuyahoga County?</p> <p>11 A. Yes.</p> <p>12 Q. In what way do you believe that the</p> <p>13 grading of hospital systems and physicians on</p> <p>14 how effectively pain has been treated has been</p> <p>15 a contributing factor to the opioid abuse</p> <p>16 epidemic in Cuyahoga County?</p> <p>17 A. What was the first two words you</p> <p>18 said, "the grading"?</p> <p>19 Q. In what way do you believe that the</p> <p>20 grading --</p> <p>21 A. Oh, grading.</p> <p>22 Q. -- of hospitals and physicians on</p> <p>23 how effectively they treat pain has contributed</p> <p>24 to opioid abuse and addiction in Cuyahoga</p> <p>25 County?</p>

<p style="text-align: right;">Page 202</p> <p>1 A. Well, if a person has a low 2 threshold of pain and they report -- if I 3 understand of your question -- a low, I'm a 2 4 or 3, it would not be required for them to get 5 a medication, but if they say, well, I am a 10 6 and, in fact, I'm a 15, and say higher numbers, 7 they could possibly get a higher amount of 8 doses than they would normally get without 9 asking the question. 10 Q. Do you believe that the ADAMHS 11 Board is qualified to assess the 12 appropriateness of prescribing decisions by 13 particular licensed physician to particular 14 patients? 15 A. No. I think that's up to the 16 certified boards to do that. No, I don't. 17 Q. Do you agree that a licensed 18 prescribing physician is the person who is best 19 situated to determine whether or not a 20 prescription opioid medication is appropriate 21 for a particular patient? 22 A. Yes. 23 Q. And that's because a prescribing 24 physician is the one who is able to see a 25 patient and take a medical history and</p>	<p style="text-align: right;">Page 204</p> <p>1 proper authorities to evaluate, but I don't 2 think that's our role to do the actual 3 evaluation ourselves. 4 Q. Are you aware of any illegitimate 5 or illegal prescribing of prescription opioid 6 medications by healthcare providers within 7 Cuyahoga County? 8 A. No, I'm not. 9 Q. The next item on the list here 10 refers to direct-to-consumer advertising; do 11 you see that? 12 A. Yes, I do. 13 Q. What is your understanding about 14 what direct-to-consumer advertising is? 15 A. The advertising on TV, that you 16 should get ABC drug, and that will help you 17 with your back pain or whatever. 18 Q. Are you aware of any 19 direct-to-consumer advertising that has been 20 conducted by the manufacturers of prescription 21 opioid medications? 22 MS. SACKS: Objection. 23 A. No, I'm not. I'm not. 24 Q. Are you aware of any specific 25 interactions that representatives of the</p>
<p style="text-align: right;">Page 203</p> <p>1 understand exactly what the illness is, right? 2 MS. SACKS: Objection. 3 A. Yes. 4 Q. Does the ADAMHS Board do anything 5 to come in after the fact and review whether or 6 not prescriptions made by physicians are 7 legitimate? 8 MS. SACKS: Objection. 9 A. Does the ADAMHS Board come in and 10 do something if somebody says that the pain is 11 legitimate? 12 Q. No. We talked about how a licensed 13 physician is the one best situated to make a 14 prescribing decision for a particular patient, 15 right? 16 A. Yeah. 17 Q. My question to you now is whether 18 or not the ADAMHS Board ever comes in and 19 assesses whether or not a healthcare provider 20 who has prescribed an opioid medication has 21 done so mistakenly or illegitimately? 22 MS. SACKS: Objection. 23 A. I think if -- I think that if we 24 were told something is going on that it's 25 illegal, that we would turn it over to the</p>	<p style="text-align: right;">Page 205</p> <p>1 manufacturers of prescription opioid 2 medications have had with licensed healthcare 3 providers in or around Cuyahoga County? 4 A. I'm aware that physicians would 5 call and ask for authority to pay something for 6 a specific drug that somebody has not approved, 7 and I can't give any examples, but I'm aware 8 that that happens, which I turn over to the 9 chief clinical officer. 10 Q. Is that in relation to prescription 11 opioid medications? 12 A. I don't know. 13 Q. Let me ask you the question this 14 way: Are you aware of any particular 15 interactions that representatives of 16 prescription opioid manufacturers have had with 17 licensed physicians or other healthcare 18 providers in or around Cuyahoga County about 19 prescription opioid medications? 20 A. No, I'm not. 21 Q. Are you aware of any misleading or 22 fraudulent statements that the makers of 23 prescription opioid medications have made to 24 the medical community in or around Cuyahoga 25 County?</p>

<p style="text-align: right;">Page 206</p> <p>1 A. No, I'm not.</p> <p>2 MS. SACKS: Objection.</p> <p>3 Q. Are you aware of any misleading or</p> <p>4 false statements about prescription opioid</p> <p>5 medications that either the makers of</p> <p>6 prescription opioid medications or others</p> <p>7 operating in connection with prescription</p> <p>8 opioid medications have made to the medical</p> <p>9 community in Cuyahoga County?</p> <p>10 A. No, I'm not.</p> <p>11 Q. Do you know why Representative</p> <p>12 Sprague and his colleagues refer to the opioid</p> <p>13 abuse epidemic as a state-sponsored problem?</p> <p>14 A. I don't know why.</p> <p>15 Q. What is your understanding?</p> <p>16 MS. SACKS: Objection.</p> <p>17 A. My understanding is that the state</p> <p>18 was being bombarded for funding, either being</p> <p>19 where the funding was either being cut or</p> <p>20 needed because of the escalation and need for</p> <p>21 folks with opiate problems around the state.</p> <p>22 Q. What is your understanding as to</p> <p>23 why Representative Sprague and his colleagues</p> <p>24 referred to the opioid abuse epidemic in Ohio</p> <p>25 as a state-sponsored problem?</p>	<p style="text-align: right;">Page 208</p> <p>1 opioids?</p> <p>2 MS. SACKS: Objection.</p> <p>3 A. Yes.</p> <p>4 Q. I'm going to move along to the next</p> <p>5 document, and you can set the one in front of</p> <p>6 you aside for a moment.</p> <p>7 - - - - -</p> <p>8 (Thereupon, Deposition Exhibit 11,</p> <p>9 Designated Confidential, September</p> <p>10 2013 Email, Subject RE; September 12</p> <p>11 Testimony for Rep. Sprague</p> <p>12 Prescription Drug Addiction</p> <p>13 Legislative Study Committee, with</p> <p>14 Attachment, Beginning with Bates</p> <p>15 Label CUYAH 12550626, was marked for</p> <p>16 purposes of identification.)</p> <p>17 - - - - -</p> <p>18 Q. Mr. Denihan, this is a document</p> <p>19 marked as Exhibit 11. It is another email</p> <p>20 exchange from September 2013, and I'll give you</p> <p>21 whatever time you need to look it over, but</p> <p>22 I'll just represent, for the record, it is an</p> <p>23 exchange between you, Dr. Christina Delos</p> <p>24 Reyes, and Mr. Osiecki about pain management</p> <p>25 guidelines and the state medical board, in</p>
<p style="text-align: right;">Page 207</p> <p>1 MS. SACKS: Objection. He just</p> <p>2 answered that.</p> <p>3 Q. Go ahead.</p> <p>4 A. I don't know why he said that,</p> <p>5 other than it happens across the whole state.</p> <p>6 Q. Do you believe that the Ohio</p> <p>7 Medical Board shares responsibility for levels</p> <p>8 of opioid abuse, addiction and overdose?</p> <p>9 MS. SACKS: Objection.</p> <p>10 A. I don't know.</p> <p>11 Q. Well, you indicated earlier that</p> <p>12 the Ohio Medical Board, as Representative</p> <p>13 Sprague talked about, had altered prescribing</p> <p>14 guidelines to treat pain as the fifth vital</p> <p>15 sign, and in other ways, and pushed that.</p> <p>16 Do you believe that the Ohio</p> <p>17 Medical Board has some responsibility, in light</p> <p>18 of the actions they took in the 1990s, to</p> <p>19 change prescribing guidelines?</p> <p>20 A. Yes, as noted in this document.</p> <p>21 Q. And do you agree that the Ohio</p> <p>22 General Assembly has some share of</p> <p>23 responsibility, in light of their passage of</p> <p>24 the Intractable Pain Act in 1998 that also</p> <p>25 changed prescribing guidelines for prescription</p>	<p style="text-align: right;">Page 209</p> <p>1 connection with the use of prescription opioid</p> <p>2 medications.</p> <p>3 MS. SACKS: It is two sided.</p> <p>4 Is the highlighting on the second</p> <p>5 page yours?</p> <p>6 MR. BOEHM: No. I believe that the</p> <p>7 highlighting came to us in the production from</p> <p>8 the county.</p> <p>9 Q. Have you had a chance the look this</p> <p>10 over.</p> <p>11 A. Yes. I am just finishing. Thank</p> <p>12 you. Okay.</p> <p>13 Q. I want to direct your attention,</p> <p>14 now that you have had a chance to read the</p> <p>15 entire document, to the email you sent on</p> <p>16 September 6, 2013 at 5:15 p.m. It's about</p> <p>17 halfway down the first page of the document.</p> <p>18 And you are writing to Dr. Christina Delos</p> <p>19 Reyes; do you see that?</p> <p>20 A. Yes.</p> <p>21 Q. Dr. Christina Delos Reyes is a</p> <p>22 medical doctor, right?</p> <p>23 A. Yes.</p> <p>24 Q. And she is somebody who has</p> <p>25 consulted with and worked with the ADAMHS Board</p>

<p style="text-align: right;">Page 210</p> <p>1 for Cuyahoga County?</p> <p>2 A. Yes.</p> <p>3 Q. Have you ever discussed with Dr.</p> <p>4 Christina Delos Reyes what are the causes of</p> <p>5 the opiate abuse epidemic in the county?</p> <p>6 A. I don't recall such discussions,</p> <p>7 but it's possible.</p> <p>8 Q. But here you indicate to Dr. Delos</p> <p>9 Reyes that you have a few recommendations that</p> <p>10 you would make in connection with opioid abuse</p> <p>11 in the county.</p> <p>12 A. Yes, I see that.</p> <p>13 Q. The first thing that said is you</p> <p>14 would like to see some specific training for</p> <p>15 doctors on addiction and proper drug</p> <p>16 prescription; do you see that?</p> <p>17 A. Uh-huh.</p> <p>18 Q. What about what was happening in</p> <p>19 the medical community at this time was not</p> <p>20 working, in your view, that you thought</p> <p>21 required specific training for doctors?</p> <p>22 A. I had doctors say to me that they</p> <p>23 needed more training.</p> <p>24 Q. Well, you say -- did you have</p> <p>25 doctors say to you they needed more training</p>	<p style="text-align: right;">Page 212</p> <p>1 inconsistent, and that I felt that, on the</p> <p>2 surface they seemed to be pretty good, but in</p> <p>3 reality they weren't working.</p> <p>4 Q. In what way were they not working?</p> <p>5 A. Doctors weren't following it.</p> <p>6 Q. In what way were doctors not</p> <p>7 following them?</p> <p>8 A. Well, most of the pain management</p> <p>9 policy said to use OARRS, for example.</p> <p>10 Sometimes they'd say, I just want to get them</p> <p>11 out of my office, sign the script and get rid</p> <p>12 of them. That's an example.</p> <p>13 Q. What is the OARRS database?</p> <p>14 A. It is of the user who is receiving</p> <p>15 it, and I believe the Social Security Number,</p> <p>16 and it has a doctor who prescribed it and what</p> <p>17 the prescription was, and the date. I think</p> <p>18 that's what it is.</p> <p>19 Q. In what way was utilization of</p> <p>20 OARRS helpful in addressing and understanding</p> <p>21 opioid abuse?</p> <p>22 A. A client saying, "I need this, I</p> <p>23 need this," and they would call, they would</p> <p>24 find out they just got it a week before from</p> <p>25 another doctor, who prescribed the same thing</p>
<p style="text-align: right;">Page 211</p> <p>1 about proper drug prescription use?</p> <p>2 A. Yes.</p> <p>3 Q. What did those doctors say to you</p> <p>4 about that?</p> <p>5 A. We need more training, relative to</p> <p>6 prescription use and also the use of OARRS,</p> <p>7 that there ought to be a way to make sure that</p> <p>8 they make the call to see if -- to find out</p> <p>9 whether the individual had used the</p> <p>10 prescription before, if at all.</p> <p>11 Q. Did ADAMHS ever provide any</p> <p>12 specific training for doctors in this community</p> <p>13 about addiction and the proper use of</p> <p>14 prescription opioid medications?</p> <p>15 A. No, not to my knowledge.</p> <p>16 Q. The second recommendation you make</p> <p>17 is that you would like to see consistent and</p> <p>18 reasonable pain management policy for</p> <p>19 hospitals?</p> <p>20 A. Uh-huh.</p> <p>21 Q. What did you mean by that?</p> <p>22 A. At that time, I thought that the</p> <p>23 pain management were inconsistent among one</p> <p>24 another. I can't remember where they were</p> <p>25 inconsistent, but I thought they were</p>	<p style="text-align: right;">Page 213</p> <p>1 and the same amount.</p> <p>2 Q. The ADAMHS Board for Cuyahoga</p> <p>3 County had access to the OARRS database as</p> <p>4 well, correct?</p> <p>5 MS. SACKS: Objection.</p> <p>6 A. Our physicians did, but I never</p> <p>7 used it.</p> <p>8 Q. When you say your physicians, do</p> <p>9 you mean doctors like Christina Delos Reyes?</p> <p>10 A. Yes.</p> <p>11 Q. Why didn't you ever use it?</p> <p>12 MS. SACKS: Objection. Form.</p> <p>13 A. I don't recall specifically why,</p> <p>14 but -- what would I do with it? I don't know</p> <p>15 what I would do with it, quite frankly.</p> <p>16 Q. Well, you could have used OARRS</p> <p>17 data --</p> <p>18 MS. SACKS: Hold on. Hold on. Let</p> <p>19 him ask a question and then you answer.</p> <p>20 Q. Go ahead and finish. I didn't mean</p> <p>21 to cut you off.</p> <p>22 A. I don't know why I didn't use it.</p> <p>23 I just didn't use it. I felt this was for --</p> <p>24 an official document for the doctors to use and</p> <p>25 not for me as an administrator to use.</p>

Page 214

1 I would just find out information
2 about one client. What would I do with it?
3 Q. Well, you could use the OARRS
4 database to determine the volume of
5 prescription opioids being prescribed by
6 doctors in Cuyahoga County, correct?
7 MS. SACKS: Objection.
8 A. I don't know if that's a fact.
9 What I do know is that we could find out for a
10 specific individual, and it never occurred to
11 me, other than of the hospital finding out on
12 their pain management that who is using what
13 and so forth. So I didn't use it.
14 Q. Do you know when the county first
15 gained access to the OARRS database, whether it
16 used it or not?
17 A. No, I didn't. The OARRS didn't
18 come up until the heroin epidemic, opiate
19 epidemic surfaced.
20 Q. Do you know when the OARRS system
21 was set up?
22 A. No, I don't.
23 MS. SACKS: Objection.
24 Q. You indicate that you would like to
25 see consistent and reasonable pain management

Page 215

1 policies for hospitals. Were there ways in
2 which you considered pain management policies
3 at hospitals to be unreasonable?
4 A. I don't remember at the time
5 specifically what the unreasonable or
6 reasonable is. I felt that it needed to have a
7 review and have some consistency amongst each
8 other.
9 Q. I'm sorry. Go ahead.
10 A. Nothing. That's all right.
11 Q. I'm very sorry. I thought you were
12 done. I apologize.
13 A. I'm done now.
14 Q. You indicated earlier that doctors
15 at the hospitals may not have been following
16 the guidelines that were in place, right?
17 A. Uh-huh.
18 Q. Yes?
19 A. Yes.
20 MS. SACKS: Objection.
21 Q. At what hospitals do you believe
22 there were doctors who were not following the
23 prescribing guidelines for the use of
24 prescription opioids?
25 A. I don't remember at all.

Page 216

1 Q. Are you -- whether you can remember
2 the details today or not, do you recall that
3 there were specific instances where healthcare
4 providers at hospitals within Cuyahoga County
5 failed to appropriately follow guidelines for
6 the use of prescription opioid medications?
7 A. They would come up in complaints
8 registered by individuals, and we received
9 complaints from individuals, and that's how
10 that type of stuff -- that's one of the ways it
11 surfaced.
12 Q. Who were the individuals who
13 would --
14 A. The users themselves.
15 Q. Patients?
16 A. Yeah.
17 Q. What would the nature of their
18 complaints be?
19 A. I don't remember the nature of
20 their complaints. Also those that are in
21 recovery would also share that.
22 Q. What would they complain about?
23 A. They would tell about the process.
24 Q. I understand, but what about the
25 process would individuals who are seeing these

Page 217

1 doctors at the hospitals in the county complain
2 about?
3 A. I don't remember specifically. All
4 I remember is that that is an avenue where some
5 of this information came from.
6 Q. Dr. Delos Reyes writes back to you
7 in the next email up the chain and says, "I
8 like what you have said here. All of your
9 recommendations have the potential to make a
10 big difference. However, I wonder what the
11 legislature can do about payment management at
12 hospitals?"
13 A. Yes, that's the question.
14 Q. Do you see that?
15 A. Yeah.
16 Q. "It seems like the hospitals
17 function outside of what the legislature does,
18 except perhaps through the state medical
19 board"; do you see that?
20 A. Uh-huh.
21 Q. Did I read that correctly?
22 A. Yes, I did -- you did.
23 Q. What did you and Dr. Delos Reyes
24 want the state legislature to do in connection
25 with pain management guidelines at hospitals?

<p style="text-align: right;">Page 218</p> <p>1 A. More consistency and to --</p> <p>2 actually, two things: more consistency, not</p> <p>3 have different pain management policies, and</p> <p>4 two, have a process to see if it is actually</p> <p>5 working.</p> <p>6 Q. What do you mean by that second</p> <p>7 part, "The process to see if it is working"?</p> <p>8 A. To make sure that everybody is</p> <p>9 following the process, the pain management</p> <p>10 plan.</p> <p>11 Q. So in other words, some way in</p> <p>12 which the hospitals can measure whether or not</p> <p>13 their doctors are following the guidelines?</p> <p>14 A. Yes.</p> <p>15 Q. During the time that you were the</p> <p>16 chief executive officer for the ADAMHS Board,</p> <p>17 do you believe that the hospitals in Cuyahoga</p> <p>18 County had guidelines that allowed for them to</p> <p>19 measure whether or not their doctors were</p> <p>20 following the guidelines?</p> <p>21 A. I don't know.</p> <p>22 Q. Well, here you're saying you want</p> <p>23 the legislature to do something about it,</p> <p>24 right?</p> <p>25 A. Yeah.</p>	<p style="text-align: right;">Page 220</p> <p>1 A. I don't recall specifically, but</p> <p>2 I -- I don't recall specifically.</p> <p>3 Q. You were going to say something</p> <p>4 else. What were you going to say?</p> <p>5 A. I'm tired.</p> <p>6 MS. SACKS: If you're done, you're</p> <p>7 done. It's okay. He'll ask another question.</p> <p>8 A. I don't recall specifically.</p> <p>9 Q. In what way do you believe you</p> <p>10 created political will, with respect to the</p> <p>11 Cuyahoga County Council, in connection with</p> <p>12 opioid abuse and prescribing guidelines at</p> <p>13 hospitals?</p> <p>14 A. Legislators want to hear from not</p> <p>15 only citizens and people that run boards, but</p> <p>16 also other legislators, and to have our</p> <p>17 legislators talk to them was a big deal, and</p> <p>18 they did it, and they -- the example was the</p> <p>19 legislature that was pointed out in one of the</p> <p>20 memos previously. The name escapes me.</p> <p>21 Q. Representative Sprague?</p> <p>22 A. No. It wasn't Sprague. You said</p> <p>23 who is this person, a county council.</p> <p>24 Q. Are you talking about</p> <p>25 Representative Nan Baker?</p>
<p style="text-align: right;">Page 219</p> <p>1 Q. So was it your understanding that</p> <p>2 the hospitals had failed to put into place</p> <p>3 measures that would ensure compliance with</p> <p>4 prescribing guidelines for prescription opioid</p> <p>5 medications?</p> <p>6 A. Yes, that's true.</p> <p>7 Q. If you go up, the next email in the</p> <p>8 chain is you writing back to Dr. Delos Reyes.</p> <p>9 She corrects your spelling of the term OARRS.</p> <p>10 A. Right. Yes, she did, put the R</p> <p>11 where the S is.</p> <p>12 MR. BOEHM: And for the court</p> <p>13 reporter, OARRS is O-A-R-R-S.</p> <p>14 A. Two Rs.</p> <p>15 Q. You write back to say, "I don't</p> <p>16 know how the legislature can impact the</p> <p>17 hospitals, but I do know is we have to create</p> <p>18 the political will for them to act, much like</p> <p>19 we did for our county council to act as they</p> <p>20 are now"; do you see that?</p> <p>21 A. Yes, I do.</p> <p>22 Q. What did you mean when you talked</p> <p>23 about creating political will at the Ohio</p> <p>24 legislature level, similar to what you had done</p> <p>25 with the Cuyahoga County Council?</p>	<p style="text-align: right;">Page 221</p> <p>1 A. No. But she is now with the county</p> <p>2 council, was a state legislator. That's a good</p> <p>3 example.</p> <p>4 Q. In what way do you believe the</p> <p>5 ADAMHS Board or the Cuyahoga County Opiate Task</p> <p>6 Force was able to create political will for the</p> <p>7 Cuyahoga County Council to act?</p> <p>8 MS. SACKS: Objection.</p> <p>9 A. Convince them to take a position on</p> <p>10 most likely funding, or the lack of Cuyahoga</p> <p>11 County getting funding, to stand up and be</p> <p>12 heard that this is not right.</p> <p>13 Q. You say -- you are referencing what</p> <p>14 you believe to be the creation of political</p> <p>15 will at the level of the Cuyahoga County</p> <p>16 Council, and I'm trying to understand what that</p> <p>17 is about.</p> <p>18 A. Okay. Well, let me try it one more</p> <p>19 time.</p> <p>20 Us going down ourselves were one</p> <p>21 voice, but to have Cuyahoga County Council say</p> <p>22 to the general assemble, and it's Cuyahoga</p> <p>23 County representative, "Look, there is a</p> <p>24 problem here, you got to resolve it. Cuyahoga</p> <p>25 County is not receiving enough money, as it</p>

<p style="text-align: right;">Page 222</p> <p>1 should."</p> <p>2 Q. Did that happen?</p> <p>3 A. Yes.</p> <p>4 MS. SACKS: Objection.</p> <p>5 A. And the one memo that you have</p> <p>6 there, where you asked who that is, is an</p> <p>7 example. I'm just having a brain drain here.</p> <p>8 Evelyn -- Yvonne Conwell.</p> <p>9 Q. Yvonne Conwell?</p> <p>10 A. Yvonne Conwell, that's what it was.</p> <p>11 Yvonne Conwell. That is an example.</p> <p>12 The other example is that Dan</p> <p>13 Brady, Dale Miller were former state</p> <p>14 representatives, they also played a role, and</p> <p>15 that was what I termed, in my little world,</p> <p>16 political will, that politically they stood up</p> <p>17 and had the will to say, "This is wrong."</p> <p>18 Q. And the thing that was wrong was</p> <p>19 the lack of funding that was being provided to</p> <p>20 the Cuyahoga County ADAMHS Board?</p> <p>21 A. As compared to any other county.</p> <p>22 Q. Did the efforts by the Cuyahoga</p> <p>23 County ADAMHS Board or on behalf of the</p> <p>24 Cuyahoga County ADAMHS Board to communicate</p> <p>25 with the Ohio General Assembly about funding</p>	<p style="text-align: right;">Page 224</p> <p>1 Cleveland Clinic?</p> <p>2 A. I recall a presentation, yes.</p> <p>3 Q. Who was the audience?</p> <p>4 MS. SACKS: Objection.</p> <p>5 A. They were the clinic workers.</p> <p>6 Q. Doctors?</p> <p>7 A. Some were doctors.</p> <p>8 Q. Nurses?</p> <p>9 A. Nurses, some were not.</p> <p>10 Q. Nurse practitioners?</p> <p>11 A. Pardon?</p> <p>12 Q. Nurse practitioners?</p> <p>13 A. It could be.</p> <p>14 Q. There is a section of your</p> <p>15 presentation to The Cleveland Clinic that's</p> <p>16 entitled Who is Affected, and I wanted to ask</p> <p>17 you just a couple of questions about that. Do</p> <p>18 you see that section, Who is Affected?</p> <p>19 A. Yes, I do.</p> <p>20 MS. SACKS: What page is it?</p> <p>21 MR. BOEHM: Well, unfortunately,</p> <p>22 these were produced to us in an unnumbered</p> <p>23 format, but if you look --</p> <p>24 MS. SACKS: The Bates number.</p> <p>25 MR. BOEHM: -- Bates number is</p>
<p style="text-align: right;">Page 223</p> <p>1 issues have any impact?</p> <p>2 MS. SACKS: Objection.</p> <p>3 A. Whether it was successful or not?</p> <p>4 Q. Yes.</p> <p>5 A. No.</p> <p>6 Are we through with this one?</p> <p>7 Q. Yes.</p> <p>8 - - - - -</p> <p>9 (Thereupon, Deposition Exhibit 12,</p> <p>10 Designated Confidential, 5/18/2017</p> <p>11 Email, Subject: Cleveland Clinic May</p> <p>12 19 Denihan Remarks, with Attachment,</p> <p>13 Beginning with Bates Label CUYAH</p> <p>14 012564935, was marked for purposes</p> <p>15 of identification.)</p> <p>16 - - - - -</p> <p>17 Q. I'm going to mark the next document</p> <p>18 as Exhibit 12, Mr. Denihan. This is a document</p> <p>19 from May 2017 that has attached to the email</p> <p>20 some remarks that you made at The Cleveland</p> <p>21 Clinic in May of the year 2017; do you see</p> <p>22 that?</p> <p>23 A. Yes, I do.</p> <p>24 Q. Do you recall having made</p> <p>25 presentations about opioid abuse at The</p>	<p style="text-align: right;">Page 225</p> <p>1 4940.</p> <p>2 Q. The third bullet point under the</p> <p>3 section Who is Affected says that, "The face of</p> <p>4 the epidemic is right here in this room"; do</p> <p>5 you see that?</p> <p>6 A. Uh-huh.</p> <p>7 Q. What did you mean by that?</p> <p>8 A. I mean that everybody in this room</p> <p>9 is involved in it, in terms of recovery and</p> <p>10 treatment.</p> <p>11 Q. The next bullet point says, "It's</p> <p>12 suburban Caucasians between the ages of 25 and</p> <p>13 45"?</p> <p>14 A. Correct.</p> <p>15 Q. What does that mean?</p> <p>16 MS. SACKS: Objection.</p> <p>17 A. The dealers had switched from the</p> <p>18 inner city to the suburbs, and the records from</p> <p>19 the medical director not only in Cleveland,</p> <p>20 Ohio, but across largest cities of the country</p> <p>21 looked at the Caucasians in the suburbs to be</p> <p>22 some of the main targets.</p> <p>23 Q. Is it your understanding that in</p> <p>24 Cuyahoga County, as in other parts of the</p> <p>25 country, the opioid abuse that has taken place</p>

<p style="text-align: right;">Page 226</p> <p>1 has been disproportionately in the Caucasian 2 community? 3 MS. SACKS: Objection. 4 A. Are you affirming what that says? 5 Q. Well, I'm making sure my 6 understanding is correct. 7 A. Yes. 8 Q. Has the fact that opioid abuse has 9 been largely centered in the Caucasian 10 community, as compared to past substance-use 11 epidemics, had any impact on the way that the 12 county has responded and tried to understand or 13 address opioid abuse? 14 MS. SACKS: Objection. 15 A. Yes. 16 Q. In what way? 17 A. Communications. Communications 18 mostly. 19 Q. What do you mean by that? 20 A. Well, we would have public 21 meetings, and in the inner city, a church would 22 be the rallying point generally, in the 23 suburban communities, it might have been city 24 hall or a -- it wasn't as much the church, as 25 it was in the inner city -- or a business. So</p>	<p style="text-align: right;">Page 228</p> <p>1 happened. 2 Q. Why was the approach to past drug 3 epidemics, such as the response to crack 4 cocaine -- 5 A. Pardon? 6 Q. Do you want me to start over? 7 A. Go ahead. 8 Q. Sure. Why was the county's 9 response to the crack cocaine epidemic, for 10 example, different in terms of the emphasis on 11 law enforcement as opposed to medical 12 treatment, as compared to the way the county 13 has responded to abusers of opioids? 14 A. I don't know if I understand your 15 question. I'll try to answer, and you can 16 clear it up. You connected law 17 enforcement with -- 18 Q. Let me clear it up. I thought I 19 had heard you say that one of the differences 20 among several differences in the way the county 21 has responded to opoid abusers -- 22 A. Right. 23 Q. -- as opposed to in the past, 24 abusers of other substances -- 25 A. Yes.</p>
<p style="text-align: right;">Page 227</p> <p>1 that's the point. 2 Q. Have there been differences in how 3 Cuyahoga County has responded to the levels of 4 opioid abuse and addiction, as compared to the 5 county's efforts to respond to drug abuse 6 epidemics from past years, such as crack? 7 A. Sure. Absolutely. It comes to 8 mind, we never had judges going out to public 9 meetings or high schools to talk about the 10 abuse. 11 Q. The abuse of crack? 12 A. Yeah. And we had had -- things 13 have changed. The chiefs of police, instead of 14 arresting people, they put them in their 15 waiting rooms and try to find treatment for 16 them. Those are changes, those are different 17 how things have happened. 18 The biggest difference, in terms of 19 the law enforcement community, has been thought 20 of as treatment versus a crime. When we had 21 the crack cocaine era, we treated it as a 22 crime, a criminal activity. And no matter 23 where it occurred, it's been treated as it 24 should be, as an illness and a disease. Those 25 are changes, those are some of the changes that</p>	<p style="text-align: right;">Page 229</p> <p>1 Q. -- had to do with the way law 2 enforcement has treated -- 3 A. Yes. 4 Q. -- individuals who are addicted, 5 and you identified some other changes as well. 6 A. Right. 7 Q. My question is why: Why is it 8 different? 9 A. Well, first of all, it makes all 10 the sense in the world. We were putting away 11 first time, nonviolent users, first time, not 12 multiple, nonviolent users, not dealers. We 13 made them felons, and we put them in prison, 14 and 15 years ago, we had one-fifth -- not 15 one-fifth -- one-fourth, 25 percent of all the 16 criminals going into the state institution 17 coming from Cuyahoga County. 18 By turning treatment versus 19 incarceration, we cut that in half, reduced the 20 number of felons, made them recovering citizens 21 with jobs. 22 Now, why is that important? 23 Besides it being the right thing to do, it 24 saves money. It saves money on state prison, 25 it creates jobs, and it makes people safer. So</p>

<p style="text-align: right;">Page 230</p> <p>1 those are some of the realities that happened 2 now, as compared to 15 years ago, and I was 3 there during both times. I was at that 4 experience. 5 Q. Is it correct that in Cuyahoga 6 County, the crack abuse epidemic was more of an 7 inner city problem than the opioid abuse 8 problem has been? 9 A. No. Just the opposite. 10 Q. Your view is that the crack abuse 11 epidemic was more suburban? 12 A. No. 13 Q. Let me make sure you heard my 14 question right, and it's possible I misstated 15 it. 16 A. Okay. 17 Q. Is it true that in Cuyahoga County, 18 abuse of crack cocaine was primarily centered 19 in the inner city? 20 A. Yes. 21 Q. And it was disproportionately 22 impacting the African American community? 23 A. Yes. 24 Q. I want to direct your attention to 25 a page a little bit further along in your</p>	<p style="text-align: right;">Page 232</p> <p>1 management protocols in place at The Cleveland 2 Clinic not being followed? 3 A. One of the ways was not using 4 OARRS, and another way was, as reported to me, 5 "Oh, I just want to get him out of here, I'll 6 just sign a script to get him out of here." 7 Q. This presentation was in May 2017, 8 right? 9 A. If that's what it says. Yeah, I 10 think so. 11 Q. And the utilization of OARRS by 12 doctors who are prescribing prescription opioid 13 medication is required under Ohio law, right? 14 MS. SACKS: Objection. 15 A. I believe so, yeah. 16 Q. Toward the end of the presentation, 17 if you turn to the next page from where you are 18 now, it says, What is Our Agency Doing About 19 This Tsunami; do you see that? 20 A. I see it, yes. 21 Q. The final bullet point on this page 22 refers to your gratitude to Cuyahoga County 23 executive Armond Budish and the Cleveland Mayor 24 Frank Jackson for making this happen; do you 25 see that?</p>
<p style="text-align: right;">Page 231</p> <p>1 presentation to The Cleveland Clinic that has 2 the section What Explains This Tsunami; do you 3 see that? 4 A. I'll find it. Okay. I'm with you. 5 Q. The third bullet point says, "While 6 the pain management protocols at The Cleveland 7 Clinic are very good, they are not always 8 followed"; do you see that? 9 A. I see it. Wait a minute. I'm 10 sorry. 11 MS. SACKS: He's talking about this 12 section up here. 13 Q. The third bullet point down on this 14 page. 15 A. Go ahead. 16 Q. Did I read that correctly? 17 A. Uh-huh. 18 Q. Yes? 19 A. Yes. 20 Q. How did you become aware the pain 21 management protocols of The Cleveland Clinic 22 were not being followed? 23 A. By doctors, by clients, by users, 24 and people in recovery. 25 Q. In what way were the pain</p>	<p style="text-align: right;">Page 233</p> <p>1 A. Yes. 2 Q. What are you talking about there? 3 MS. SACKS: Objection. 4 A. The example of financing that you 5 had before, where the city and the county gave 6 25,000 each -- or 250,000 each. 7 Q. Do you agree that the use of heroin 8 in Cuyahoga County and across the State of Ohio 9 has ebbed and flowed over the past many 10 decades? 11 MS. SACKS: Objection. 12 A. Yes, I do. 13 Q. And that the popularity of various 14 drugs that are abused by people in the 15 community phase in and out in cycles, correct? 16 MS. SACKS: Objection. 17 A. They could. 18 Q. That's been true with respect to 19 heroin, right? 20 MS. SACKS: Objection. 21 A. Yes. 22 Are you through with this one? 23 Q. Yes. 24 And that's been true with respect 25 to heroin going back many decades in Cuyahoga</p>

<p style="text-align: right;">Page 234</p> <p>1 County, right?</p> <p>2 MS. SACKS: Same objection.</p> <p>3 A. Pardon?</p> <p>4 Q. And that has been true with respect</p> <p>5 to heroin going back many decades here in</p> <p>6 Cuyahoga County, right?</p> <p>7 A. Yes.</p> <p>8 MS. SACKS: Same objection.</p> <p>9 - - - - -</p> <p>10 (Thereupon, Deposition Exhibit 13,</p> <p>11 Designated Confidential, 8/26/2014</p> <p>12 Email, Subject: ADAMHS TV 20 Heroin</p> <p>13 Interview Q&A, Beginning with Bates</p> <p>14 Label CUYAH 012397975, was marked</p> <p>15 for purposes of identification.)</p> <p>16 - - - - -</p> <p>17 Q. I'm showing you the next document,</p> <p>18 which has been marked as Exhibit 13. It's from</p> <p>19 August 2014. This is similar to the document</p> <p>20 we were just looking at. It is a script of a</p> <p>21 presentation that you are going to make, but</p> <p>22 this one is to a television station, TV 20; do</p> <p>23 you see that?</p> <p>24 A. Uh-huh.</p> <p>25 Q. And it is going to be broadcast,</p>	<p style="text-align: right;">Page 236</p> <p>1 identified as somebody with knowledge about the</p> <p>2 claims or allegations in the case. He was not</p> <p>3 designated as a 30(b)(6) witness, if that's</p> <p>4 what you are referring to.</p> <p>5 MS. SACKS: Well, you said</p> <p>6 identified by lawyers in this case as somebody</p> <p>7 who has knowledge, but we didn't identify him</p> <p>8 as somebody with knowledge. Did you mean you,</p> <p>9 because you picked him?</p> <p>10 MR. BOEHM: We can deal with this</p> <p>11 off the record. I was not referring to</p> <p>12 30(b)(6), if that's what you're talking about.</p> <p>13 MS. SACKS: Okay. Right.</p> <p>14 MR. BOEHM: I'm not sure it matters</p> <p>15 anyway.</p> <p>16 Q. Dr. Denihan, we're back from a</p> <p>17 short break, and as I indicated, I believe and</p> <p>18 hope that we are in the home stretch here</p> <p>19 today. Thank you very much for your time so</p> <p>20 far.</p> <p>21 A. You're welcome.</p> <p>22 Q. I directed your attention to a</p> <p>23 particular page of this summary of the comments</p> <p>24 that you were going to make to a television</p> <p>25 station back in August of 2014.</p>
<p style="text-align: right;">Page 235</p> <p>1 Mr. Osiecki explains, on the Channel 5 news</p> <p>2 that night; right?</p> <p>3 A. Yes.</p> <p>4 Could we take a break.</p> <p>5 MR. BOEHM: Absolutely. Let's go</p> <p>6 off the record.</p> <p>7 THE VIDEOGRAPHER: Off the record,</p> <p>8 3:13.</p> <p>9 (Recess taken.)</p> <p>10 THE VIDEOGRAPHER: On the record,</p> <p>11 3:28.</p> <p>12 MR. BOEHM: Okay. I believe Ms.</p> <p>13 Sacks wanted to say something on the record.</p> <p>14 MS. SACKS: I do. I went back and</p> <p>15 I was just reading through the transcript in</p> <p>16 the beginning, and I noticed that you said that</p> <p>17 Mr. Denihan was identified by the lawyers in</p> <p>18 the case as somebody who has knowledge and</p> <p>19 information related to the allegations made in</p> <p>20 the lawsuit, but I just wanted to clarify that</p> <p>21 he's a fact witness, not designed by us.</p> <p>22 MR. BOEHM: Oh, correct.</p> <p>23 MS. SACKS: Did you misspeak?</p> <p>24 MR. BOEHM: No, I did not misspeak.</p> <p>25 It is true that Mr. Denihan was</p>	<p style="text-align: right;">Page 237</p> <p>1 Question 6, Why Does the Use of</p> <p>2 Heroin Ebb and Flow; do you see that?</p> <p>3 A. Yes, I do.</p> <p>4 Q. And if you look at the third -- I'm</p> <p>5 sorry.</p> <p>6 Let's go to the second sub-bullet</p> <p>7 point under the second bullet point, does that</p> <p>8 make sense? So you got the two bullet points,</p> <p>9 and under that second bullet point, there is</p> <p>10 some sub-bullet points, right?</p> <p>11 A. Uh-huh.</p> <p>12 Q. I want to direct your attention to</p> <p>13 the second sub-bullet point that says, "The</p> <p>14 drug cartel has perfected and purified heroin</p> <p>15 so that it can be snorted to achieve the same</p> <p>16 effect"; do you see that?</p> <p>17 A. Yes, I do.</p> <p>18 Q. And I asked you earlier about the</p> <p>19 role of drug cartels in Cuyahoga County, in</p> <p>20 terms of opioid abuse, distribution, overdoses</p> <p>21 and so on.</p> <p>22 A. Uh-huh.</p> <p>23 Q. Do you agree that the activities of</p> <p>24 drug cartels have materially contributed to the</p> <p>25 drug abuse epidemic in Cuyahoga County?</p>

<p style="text-align: right;">Page 238</p> <p>1 MS. SACKS: Objection.</p> <p>2 A. Yes.</p> <p>3 Q. Do you agree that the activities of</p> <p>4 drug dealers in and around Cuyahoga County have</p> <p>5 contributed materially to the opioid abuse</p> <p>6 epidemic in this community?</p> <p>7 MS. SACKS: I think that's the same</p> <p>8 question.</p> <p>9 MR. BOEHM: No, it's not.</p> <p>10 A. The part of the question that I</p> <p>11 heard was "materially." What is the</p> <p>12 difference? I don't understand the difference</p> <p>13 between --</p> <p>14 Q. I first asked you about drug</p> <p>15 cartels, and then the next question I asked you</p> <p>16 was about drug dealers, and while I agree with</p> <p>17 Ms. Sacks that those are not necessary</p> <p>18 distinct, they are different things and, in</p> <p>19 fact, you have them listed separately in the</p> <p>20 bullet points for your presentation to the</p> <p>21 television station; do you see that?</p> <p>22 A. Uh-huh.</p> <p>23 Q. Yes?</p> <p>24 A. Oh, I see what you're saying. So</p> <p>25 the answer is yes.</p>	<p style="text-align: right;">Page 240</p> <p>1 Q. Do you know the percentage of</p> <p>2 individuals in Cuyahoga County who have become</p> <p>3 addicted to opioids who initiated their use of</p> <p>4 opioids through illicit heroin?</p> <p>5 MS. SACKS: Objection.</p> <p>6 A. No, I do not.</p> <p>7 Q. Do you know the percentage of</p> <p>8 individuals who have developed an opioid-use</p> <p>9 disorder in Cuyahoga County who have initiated</p> <p>10 their abuse through prescription opioid pills?</p> <p>11 MS. SACKS: Objection.</p> <p>12 A. No, I do not.</p> <p>13 Q. Do you agree that heroin has been</p> <p>14 easily accessible to substance abusers in</p> <p>15 Cuyahoga County?</p> <p>16 MS. SACKS: Objection.</p> <p>17 A. Yes.</p> <p>18 Q. Do you agree that the relationship</p> <p>19 between prescription painkillers and heroin is</p> <p>20 poorly researched?</p> <p>21 MS. SACKS: Objection.</p> <p>22 A. Yes.</p> <p>23 Q. And do you agree that it is not</p> <p>24 clear the extent to which individuals who abuse</p> <p>25 prescription opioid medications use heroin</p>
<p style="text-align: right;">Page 239</p> <p>1 Q. So let me just ask the question,</p> <p>2 and then you can answer it so we have it clean</p> <p>3 for the record.</p> <p>4 Do you agree that the activities of</p> <p>5 drug dealers in and around Cuyahoga County have</p> <p>6 contributed materially to the opioid abuse</p> <p>7 epidemic within this community?</p> <p>8 A. Yes.</p> <p>9 Q. How would you characterize the</p> <p>10 extent to which the activities of drug cartels</p> <p>11 and drug dealers have contributed to the opioid</p> <p>12 abuse epidemic in this community?</p> <p>13 A. I don't think I could -- relative</p> <p>14 to dealers is third hand, and it's from</p> <p>15 information received from police organizations.</p> <p>16 Cartels, my knowledge is what I</p> <p>17 read or hear. So I don't know if I could</p> <p>18 answer that question.</p> <p>19 Q. Do you agree the activities of drug</p> <p>20 cartels and drug dealers in and around Cuyahoga</p> <p>21 County have been significant contributors to</p> <p>22 opioid abuse and opioid-related overdose</p> <p>23 fatalities in this community?</p> <p>24 MS. SACKS: Objection.</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 241</p> <p>1 interchangeably or have transitioned from</p> <p>2 prescription opioid medications to the use of</p> <p>3 heroin?</p> <p>4 MS. SACKS: Objection.</p> <p>5 A. I don't know.</p> <p>6 Q. You don't know one way or another?</p> <p>7 A. Right.</p> <p>8 Q. Do you agree that for the last</p> <p>9 several years, prescription opioid-related</p> <p>10 overdose fatalities have been trending downward</p> <p>11 in Cuyahoga County?</p> <p>12 A. I was not aware of that. You say</p> <p>13 over the last several years?</p> <p>14 Q. Yes. Do you want me to ask the</p> <p>15 question again?</p> <p>16 A. Yes.</p> <p>17 Q. Do you agree that the level of</p> <p>18 prescription drug-related overdoses has been</p> <p>19 trending downward in Cuyahoga County for the</p> <p>20 last several years?</p> <p>21 A. I agree that it's been trending</p> <p>22 down over the last couple of years.</p> <p>23 Q. Do you agree that the number of</p> <p>24 prescription opioid-related fatalities in</p> <p>25 Cuyahoga County has been trending downward in</p>

<p style="text-align: right;">Page 242</p> <p>1 Cuyahoga County -- I'm going to start over. 2 Okay. Let's do that one more time. 3 Do you agree that the level of 4 prescription drug-related overdose fatalities 5 in Cuyahoga County has been trending downward 6 ever since 2010? 7 A. I did not know that. 8 Q. What is your understanding about 9 when prescription drug-related overdose 10 fatalities began to trend downward? 11 MS. SACKS: Objection. 12 A. I understood it was not 2010, it 13 was after that date. 14 - - - - - 15 (Thereupon, Deposition Exhibit 14, 16 Designated Confidential, 8/31/16 17 Email, Subject: Overdose Report, 18 with Attachment, Beginning with 19 Bates Label CUYAH 012475366, was 20 marked for purposes of 21 identification.) 22 - - - - - 23 Q. I'm showing you now a document that 24 has been marked as Exhibit 14 for purposes of 25 your deposition.</p>	<p style="text-align: right;">Page 244</p> <p>1 Q. Okay. Figure 4 of the 2015 Ohio 2 Drug Overdose Data General Findings report, 3 that was sent to you by Mr. Royer, outlines the 4 drugs that have caused various overdose deaths 5 between the years 2010 and 2015; do you see 6 that? 7 A. Uh-huh. 8 Q. And do you see the prescription 9 opioid overdose fatalities has been -- 10 A. Yes. 11 Q. -- steadily declining since 2010? 12 A. Yes, I do. 13 Q. Is that something that you were 14 aware of before you retired as the chief 15 executive officer of the Cuyahoga County ADAMHS 16 Board? 17 A. Not to the actual dates, no. I was 18 aware of some decline, but not on the dates. 19 Q. But you see that those are the 20 data, as you look at this now, right? 21 MS. SACKS: Objection. 22 A. Yes. 23 Q. And you don't have any reason to 24 believe that Cuyahoga County has trends that 25 are any different than the ones that we are</p>
<p style="text-align: right;">Page 243</p> <p>1 Exhibit 14 is an email from August 2 2016, from somebody by the name of David Royer. 3 Do you know who David Royer is? 4 A. Yes, I do. 5 Q. Who is David Royer? 6 A. He was my counterpart in Franklin. 7 Q. Is he the CEO of the Franklin 8 ADAMHS Board? 9 A. Yes. 10 Q. The subject of the email is 11 Overdose Report, and then he attaches to his 12 email the data from the 2015 Ohio Drug Overdose 13 General Findings; do you see that? 14 A. I'm looking at it, yes. 15 MS. SACKS: Do you need a second to 16 look at it? 17 Q. Sure. Take whatever time you need 18 to look at it. I'm going to ask you a specific 19 question, along the lines of where we left off 20 before I showed you this document, that is in 21 relation to figure 4, which is on page 3 of the 22 report. 23 Just let me know when you have had 24 a chance to look that over. 25 A. Okay. Go ahead. I'm ready.</p>	<p style="text-align: right;">Page 245</p> <p>1 looking at here in figure 4; is that fair? 2 A. Ask me the question again, please. 3 Q. Sure. Do you have any reason to 4 believe that overdose fatality trends in 5 Cuyahoga County between the years 2010 and 2015 6 are any different than the trends that are 7 reflected here in figure 4 of the 2015 Ohio 8 Drug Overdose Data General Findings? 9 A. And this is a Hamilton County? 10 Q. No, it's not. This is Ohio. 11 A. Then I don't know if I agree with 12 that or not. 13 Q. Well, I'm asking you if you have 14 any reason to believe that the trends in 15 Cuyahoga County are different than the trends 16 that are set forth here in the Ohio report on 17 page 3, figure 4? 18 A. I may think they may be different. 19 Q. My question is: Do you have a 20 reason to believe that the trends are different 21 in Cuyahoga County than the trends that are 22 reported in the 2015 Ohio Drug Overdose Data 23 General Findings report that's been marked as 24 Exhibit 14 for your deposition? 25 A. No.</p>

<p style="text-align: right;">Page 246</p> <p>1 Q. And looking at figure 4, it appears</p> <p>2 that as of 2015, the number of prescription</p> <p>3 opioid overdoses is just about the same as the</p> <p>4 number of cocaine-related overdose fatalities,</p> <p>5 right, for 2015?</p> <p>6 A. If you're talking about these two</p> <p>7 right here, they are about the same, yes, yes.</p> <p>8 Q. Do you know whether or not the</p> <p>9 number of prescription opioid-related overdose</p> <p>10 fatalities has continued to go down in Cuyahoga</p> <p>11 County since 2015?</p> <p>12 A. I understood it had continued to go</p> <p>13 down, yes.</p> <p>14 Q. Do you agree the trends, in terms</p> <p>15 of prescription opioid-related overdoses, are</p> <p>16 quite favorable right now?</p> <p>17 MS. SACKS: Objection.</p> <p>18 A. I don't know what -- I don't know</p> <p>19 if I agree with "favorable" at any rate.</p> <p>20 Q. I'm talking about the trend. Of</p> <p>21 course we all agree we would like to have there</p> <p>22 to be zero, but you agree that it is a good</p> <p>23 thing when the trend is going downward, right?</p> <p>24 A. Yes, I agree it is a good thing it</p> <p>25 is going down.</p>	<p style="text-align: right;">Page 248</p> <p>1 A. I don't remember what the ask was.</p> <p>2 Q. Let me give you a minute just to</p> <p>3 take a look at this document and the</p> <p>4 attachment, and my question to you will be:</p> <p>5 What was the ask that you received from the</p> <p>6 county executive's office in July 2017?</p> <p>7 A. This looks like an ask of potential</p> <p>8 services for drug treatment.</p> <p>9 Q. If you look at your email, it says</p> <p>10 that actually it is Laura sending this document</p> <p>11 from the chief's desktop. Are you the chief in</p> <p>12 that sentence?</p> <p>13 A. Yes, I am.</p> <p>14 Q. Did sometimes people refer to you</p> <p>15 as "Chief"?</p> <p>16 A. Sometimes, yes.</p> <p>17 Q. Who is Laura?</p> <p>18 A. Laura was an assistant for Scott</p> <p>19 Osiecki.</p> <p>20 Q. And Laura indicates that you, the</p> <p>21 chief, would like for Linda to send this</p> <p>22 document to Matt Carroll at the county as a</p> <p>23 cover to the opioid ask document also attached;</p> <p>24 do you see that?</p> <p>25 A. Yes, I do.</p>
<p style="text-align: right;">Page 247</p> <p>1 - - - - -</p> <p>2 (Thereupon, Deposition Exhibit 15,</p> <p>3 Designated Confidential, 7/28/2017</p> <p>4 Email, Subject: Matt Carroll Opioid</p> <p>5 Ask July 28, 2017, with Attachment,</p> <p>6 Beginning with Bates Label CUYAH</p> <p>7 012595362, was marked for purposes</p> <p>8 of identification.)</p> <p>9 - - - - -</p> <p>10 Q. I'm showing you a document marked</p> <p>11 as Exhibit 15 from July 2017. This is an email</p> <p>12 that you authored at that time, and sent to</p> <p>13 somebody by the name of Linda Lamp; do you see</p> <p>14 that?</p> <p>15 A. Yes.</p> <p>16 Q. Who is Linda Lamp?</p> <p>17 A. She was my administrative</p> <p>18 assistant.</p> <p>19 Q. The subject is Matt Carroll Opioid</p> <p>20 Ask July 28, 2017; do you see that?</p> <p>21 A. Yes.</p> <p>22 Q. Who is Matt Carroll?</p> <p>23 A. Assistant to Armond Budish.</p> <p>24 Q. What was the ask that was being</p> <p>25 made of you?</p>	<p style="text-align: right;">Page 249</p> <p>1 Q. I don't know that we got the opioid</p> <p>2 ask document, but we did get the document that</p> <p>3 was going to be attached as a cover, that's</p> <p>4 attached, right?</p> <p>5 MS. SACKS: There is a page missing</p> <p>6 in the order. Maybe that's what you're</p> <p>7 referring to, 63?</p> <p>8 MR. BOEHM: Maybe that is the ask</p> <p>9 document. Yeah. It's possible. I'll go back</p> <p>10 and check.</p> <p>11 MS. SACKS: Okay.</p> <p>12 Q. Okay. I want to direct your</p> <p>13 attention to the first page of the attachment.</p> <p>14 The attachment is called Strategy For Tackling</p> <p>15 Cuyahoga County's Opioid Emergency; do you see</p> <p>16 that?</p> <p>17 A. Yes.</p> <p>18 Q. And then about a third or a half of</p> <p>19 the way down the page, New Dynamic; do you see</p> <p>20 that?</p> <p>21 A. Yes.</p> <p>22 Q. And it references a spike in</p> <p>23 African American deaths, right?</p> <p>24 A. Yes.</p> <p>25 Q. And you write, "This is due to the</p>

<p style="text-align: right;">Page 250</p> <p>1 addition of fentanyl to cocaine" --</p> <p>2 A. Yes.</p> <p>3 Q. -- "of which crack is a derivative,</p> <p>4 and marijuana"; do you see that?</p> <p>5 A. Yes.</p> <p>6 Q. Is it your understanding that</p> <p>7 fentanyl ws being added by drug cartels and</p> <p>8 drug dealers to cocaine?</p> <p>9 MS. SACKS: Objection.</p> <p>10 A. Yes.</p> <p>11 Q. And was fentanyl being added by</p> <p>12 drug cartels and drug dealers to marijuana?</p> <p>13 MS. SACKS: Objection.</p> <p>14 A. Yes.</p> <p>15 Q. Does Cuyahoga County have any</p> <p>16 evidence that individuals who died overdosing</p> <p>17 using cocaine that dealers had added fentanyl</p> <p>18 to had a history of abusing prescription</p> <p>19 opioids?</p> <p>20 MS. SACKS: Objection.</p> <p>21 A. I don't know.</p> <p>22 Q. Are you aware of any information or</p> <p>23 data to suggest that individuals who died from</p> <p>24 an overdose of marijuana cut or laced with</p> <p>25 fentanyl had a history of abusing prescription</p>	<p style="text-align: right;">Page 252</p> <p>1 fentanyl?</p> <p>2 MS. SACKS: Objection.</p> <p>3 A. I haven't given it any thought.</p> <p>4 - - - - -</p> <p>5 (Thereupon, Deposition Exhibit 16,</p> <p>6 Ohio Prescription Drug Abuse Task</p> <p>7 Force, Final Report, Task Force</p> <p>8 Recommendations, October 1, 2010,</p> <p>9 Beginning with Bates Label CUYAH</p> <p>10 000166378, was marked for purposes</p> <p>11 of identification.)</p> <p>12 - - - - -</p> <p>13 Q. I'm showing you a document,</p> <p>14 Mr. Denihan, marked as Exhibit 16. This is an</p> <p>15 October 2010 report by the Ohio Prescription</p> <p>16 Drug Abuse Task Force. We referenced this</p> <p>17 report a little bit earlier today. I want to</p> <p>18 give you a chance just to skim it.</p> <p>19 Do you recall that the Ohio</p> <p>20 Prescription Drug Abuse Task Force issued a</p> <p>21 report in 2010?</p> <p>22 A. Yes.</p> <p>23 Q. My questions for you are going to</p> <p>24 be in relation to a section of this report</p> <p>25 entitled How Did This Become an Epidemic. It</p>
<p style="text-align: right;">Page 251</p> <p>1 opioids?</p> <p>2 A. I don't know.</p> <p>3 Q. Do you know how those overdose</p> <p>4 deaths would be classified at the medical</p> <p>5 examiner's office?</p> <p>6 In other words, if an individual</p> <p>7 dies from an overdose of marijuana that was</p> <p>8 laced with fentanyl, how would the medical</p> <p>9 examiner categorize that overdose?</p> <p>10 A. Marijuana and fentanyl, and that's</p> <p>11 where you would find the information.</p> <p>12 Q. Does the county believe that the</p> <p>13 defendants are responsible for individuals who</p> <p>14 have died from an overdose of cocaine that was</p> <p>15 laced with fentanyl?</p> <p>16 MS. SACKS: Objection.</p> <p>17 A. I didn't understand the question.</p> <p>18 Q. Sure. Do you believe that the</p> <p>19 defendants in this lawsuit are somehow</p> <p>20 responsible for the overdose fatality of an</p> <p>21 individual who has died from overdosing on</p> <p>22 cocaine that was laced with fentanyl?</p> <p>23 A. I haven't given it any thought.</p> <p>24 Q. How about an individual who has</p> <p>25 died from using marijuana that was laced with</p>	<p style="text-align: right;">Page 253</p> <p>1 is on page 21, and it carries over for a few</p> <p>2 pages from there.</p> <p>3 Do you recall that the Ohio</p> <p>4 Prescription Drug Abuse Task Force in 2010</p> <p>5 reached conclusions about the contributing</p> <p>6 factors to the trend of opioid abuse and</p> <p>7 overdose at the time?</p> <p>8 A. Yes.</p> <p>9 Q. And on that first page of this</p> <p>10 section, page 21, do you see there is a</p> <p>11 schematic that has the word "epidemic" in a</p> <p>12 circle, and then there are these boxes that</p> <p>13 reflect contributing factors pointing toward</p> <p>14 the epidemic; do you see that?</p> <p>15 A. Yes.</p> <p>16 Q. Is that a schematic that you have</p> <p>17 seen before?</p> <p>18 A. I don't recall. It doesn't -- I</p> <p>19 just don't recall it.</p> <p>20 Q. We have already talked about</p> <p>21 changes in clinical pain management and the</p> <p>22 growing use of prescription opioids, and we</p> <p>23 have talked about direct-to-consumer marketing.</p> <p>24 I want to ask and you few more questions about</p> <p>25 some of the other items listed here.</p>

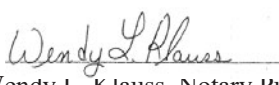
<p style="text-align: right;">Page 254</p> <p>1 One of the boxes that this report</p> <p>2 is saying has been a contributing factor to</p> <p>3 opioid abuse is aggressive marketing of</p> <p>4 opioids; do you see that?</p> <p>5 A. Yes.</p> <p>6 Q. Do you have an understanding about</p> <p>7 how, if at all, aggressive marketing of opioids</p> <p>8 has contributed to opioid abuse and overdose in</p> <p>9 Cuyahoga County?</p> <p>10 A. My understanding is that opioid use</p> <p>11 is a more continuing contributing factor to</p> <p>12 death in Cuyahoga County.</p> <p>13 Q. My question is about marketing of</p> <p>14 opioid medications.</p> <p>15 Do you have any knowledge or</p> <p>16 information about the nature of marketing</p> <p>17 efforts to promote prescription opioid</p> <p>18 medications?</p> <p>19 A. No.</p> <p>20 Q. Have you ever heard of the term</p> <p>21 "diversion"?</p> <p>22 A. I have heard of the term. I don't</p> <p>23 know how it is referred to here, but...</p> <p>24 Q. What is your understanding of what</p> <p>25 diversion means in the context of opioid abuse?</p>	<p style="text-align: right;">Page 256</p> <p>1 Q. Have you ever heard of the term</p> <p>2 "doctor shopping"?</p> <p>3 A. Yes.</p> <p>4 Q. What is doctor shopping?</p> <p>5 A. It's going to multiple doctors,</p> <p>6 asking for a prescription to be filled that</p> <p>7 would be an opiate.</p> <p>8 Q. And do you agree that doctor</p> <p>9 shopping is also against the law?</p> <p>10 MS. SACKS: Objection.</p> <p>11 A. Yes.</p> <p>12 Q. Do you know the percentage of</p> <p>13 prescription opioid pills that are used for</p> <p>14 abuse that have been diverted, as opposed to</p> <p>15 have been prescribed by a licensed physician to</p> <p>16 the individual who is using the medication?</p> <p>17 MS. SACKS: Objection.</p> <p>18 A. No, I don't.</p> <p>19 Q. Have you ever heard of the United</p> <p>20 States Drug Enforcement Agency?</p> <p>21 A. Yes.</p> <p>22 Q. What is your understanding about</p> <p>23 the responsibilities and duties of the DEA?</p> <p>24 A. Enforcement to stop illegal drugs</p> <p>25 coming into this country.</p>
<p style="text-align: right;">Page 255</p> <p>1 A. I don't know if I have one. I</p> <p>2 don't have a -- I don't know what diversion</p> <p>3 means in the context of the opioid use. I</p> <p>4 don't understand it, but it does ring a bell</p> <p>5 right now.</p> <p>6 Q. But you understand that there are</p> <p>7 legitimate medical purposes for using a</p> <p>8 prescription opioid medication, right?</p> <p>9 MS. SACKS: Objection.</p> <p>10 Q. Yes?</p> <p>11 A. Yes.</p> <p>12 Q. And anybody who uses a prescription</p> <p>13 opioid medication that has not been prescribed</p> <p>14 to them by a licensed physician is breaking the</p> <p>15 law, right?</p> <p>16 MS. SACKS: Objection.</p> <p>17 Q. Yes?</p> <p>18 A. Yes.</p> <p>19 Q. So, for example, if somebody were</p> <p>20 to go into a family member's bathroom, open up</p> <p>21 the medicine cabinet and take pills of</p> <p>22 prescription opioids, not prescribed to them,</p> <p>23 that would not be legal, correct?</p> <p>24 MS. SACKS: Objection.</p> <p>25 A. Correct.</p>	<p style="text-align: right;">Page 257</p> <p>1 Q. Do you believe that the United</p> <p>2 States Drug Enforcement Agency has any</p> <p>3 responsibilities in connection with the abuse</p> <p>4 of controlled substances, including</p> <p>5 prescription opioid medications?</p> <p>6 MS. SACKS: Objection.</p> <p>7 Q. Do you want me to say it again?</p> <p>8 A. No. I would say no, because of the</p> <p>9 way you said it, so, no.</p> <p>10 Q. When you say you were going to say</p> <p>11 no because of the way I said it, what do you</p> <p>12 mean?</p> <p>13 A. Just no.</p> <p>14 MS. SACKS: Wait. Wait until he's</p> <p>15 done with his question.</p> <p>16 A. No.</p> <p>17 Q. Was there something about the way I</p> <p>18 said it?</p> <p>19 MS. SACKS: Objection.</p> <p>20 A. No. The answer is no.</p> <p>21 Q. So my question is: Do you believe</p> <p>22 that the United States Drug Enforcement Agency</p> <p>23 has any responsibilities in connection with the</p> <p>24 abuse of controlled substances, including</p> <p>25 prescription opioid medications?</p>

<p style="text-align: right;">Page 258</p> <p>1 A. No.</p> <p>2 MS. SACKS: Objection.</p> <p>3 Q. Why not?</p> <p>4 A. From my understanding, theirs the</p> <p>5 enforcement of drugs coming into this country,</p> <p>6 and not prescribed drugs by doctors and local</p> <p>7 hospitals.</p> <p>8 Q. Have you ever heard of the</p> <p>9 aggregate production quota?</p> <p>10 A. No.</p> <p>11 Q. Do you know what role, if any, the</p> <p>12 United States Drug Enforcement Agency plays in</p> <p>13 terms of determining how much of a controlled</p> <p>14 substance, including a prescription opioid</p> <p>15 medication, can be manufactured by</p> <p>16 pharmaceutical companies in the United States</p> <p>17 each year?</p> <p>18 A. No.</p> <p>19 Q. Have you ever heard anything about</p> <p>20 that?</p> <p>21 MS. SACKS: Objection.</p> <p>22 A. No.</p> <p>23 Q. Have you ever heard of the Joint</p> <p>24 Commission?</p> <p>25 A. I've heard -- no. I've heard of</p>	<p style="text-align: right;">Page 260</p> <p>1 A. Yes, that's correct. I have not</p> <p>2 heard of it.</p> <p>3 Q. Do you believe that licensed</p> <p>4 physicians who have prescribed opioid</p> <p>5 medications in and around Cuyahoga County share</p> <p>6 responsibility for the opioid abuse epidemic in</p> <p>7 this community?</p> <p>8 MS. SACKS: Objection.</p> <p>9 A. Yes.</p> <p>10 Q. And why do you say yes?</p> <p>11 A. For prescribing drugs that are not</p> <p>12 necessarily -- that are not needed by</p> <p>13 individuals that want prescribed drugs, for</p> <p>14 overprescribing drugs, overprescribing.</p> <p>15 Q. And when you use the term</p> <p>16 "overprescribing," what do you think that term</p> <p>17 means?</p> <p>18 A. That a person is requesting a</p> <p>19 refill or a continuation, and the doctor does</p> <p>20 not believe that it's necessary, but the person</p> <p>21 convinces them that they should have it, and</p> <p>22 they agree with that person and prescribe it.</p> <p>23 Q. Do you agree that a licensed</p> <p>24 physician must consider the risks and the</p> <p>25 benefits of prescribing an opioid medication to</p>
<p style="text-align: right;">Page 259</p> <p>1 joint commissions, but I don't know the</p> <p>2 relationship to this. I don't know.</p> <p>3 Q. You have never heard of the Joint</p> <p>4 Commission having adopted the treatment of pain</p> <p>5 as the fifth vital sign?</p> <p>6 A. No.</p> <p>7 Q. The way you said "no" made me think</p> <p>8 that maybe -- there was some hesitation.</p> <p>9 A. There is a lot of joint commissions</p> <p>10 around --</p> <p>11 MS. SACKS: Wait until he's done</p> <p>12 with his question.</p> <p>13 Q. The way that you said "no," you</p> <p>14 kind of suggested that maybe there was more to</p> <p>15 it. What were you trying to communicate?</p> <p>16 A. Your first question was just Joint</p> <p>17 Commission. There is a lot of joint</p> <p>18 commissions. You didn't specify the question</p> <p>19 until the second part, and the answer is still</p> <p>20 no, I don't. I have not heard of it.</p> <p>21 Q. Just to make sure the record is</p> <p>22 clear, you are saying that you have never heard</p> <p>23 of the Joint Commission in connection with the</p> <p>24 concept of treatment of pain as a fifth vital</p> <p>25 sign?</p>	<p style="text-align: right;">Page 261</p> <p>1 each individual patient?</p> <p>2 A. Yeah.</p> <p>3 Q. And do you agree that that licensed</p> <p>4 physician is duty bound to consider each</p> <p>5 patient's individual medical history, condition</p> <p>6 and diagnosis?</p> <p>7 MS. SACKS: Objection.</p> <p>8 A. Yes.</p> <p>9 Q. And do you agree that doctors</p> <p>10 cannot write a prescription without an</p> <p>11 individualized determination that a</p> <p>12 prescription for an opioid medication is</p> <p>13 medically necessary for that patient?</p> <p>14 MS. SACKS: Objection.</p> <p>15 A. I don't know. I don't understand</p> <p>16 the question.</p> <p>17 Q. Do you agree that doctors cannot</p> <p>18 write a prescription for an opioid medication</p> <p>19 without making an individualized determination</p> <p>20 for the patient that it is medically necessary?</p> <p>21 MS. SACKS: Objection.</p> <p>22 A. Yes.</p> <p>23 Q. And do you agree that when doctors</p> <p>24 make that individual, specific determination or</p> <p>25 judgment of whether to prescribe a prescription</p>

<p style="text-align: right;">Page 262</p> <p>1 medication, that they do not take into account</p> <p>2 the volume of opioid medications that are being</p> <p>3 stored at pharmacies in the communities?</p> <p>4 MS. SACKS: Objection.</p> <p>5 A. Yes.</p> <p>6 Q. Are you qualified to say whether a</p> <p>7 doctor's prescribing practices in any given</p> <p>8 case are appropriate or not?</p> <p>9 A. No.</p> <p>10 Q. Another of the boxes here on page</p> <p>11 21 of the 2010 report by the Ohio Prescription</p> <p>12 Drug Abuse Task Force says self-medicating</p> <p>13 habits of baby boomers. It is in the bottom</p> <p>14 right-hand corner of that little schematic.</p> <p>15 A. I see it.</p> <p>16 Q. What's your understanding of how</p> <p>17 self-medicating habits of baby boomers have</p> <p>18 contributed to opioid abuse and overdose in</p> <p>19 Cuyahoga County?</p> <p>20 A. I'm not sure I understand what it</p> <p>21 means in this context. I don't understand what</p> <p>22 it means in this context. I didn't write it,</p> <p>23 so other than -- I don't understand what this</p> <p>24 means by the person that wrote it.</p> <p>25 Q. Do you believe that there are</p>	<p style="text-align: right;">Page 264</p> <p>1 Do you need me to say that question</p> <p>2 one more time for you?</p> <p>3 A. No. I believe I understand it.</p> <p>4 Q. Okay.</p> <p>5 A. Besides this, is there anything</p> <p>6 else that would contribute to the opioid</p> <p>7 epidemic?</p> <p>8 Q. That's right. That is my question.</p> <p>9 A. Can you tell me what this word is</p> <p>10 here?</p> <p>11 Q. Theft.</p> <p>12 A. Oh, is that what it is?</p> <p>13 Q. Yeah. You, just for the record,</p> <p>14 you are pointing to the box that has the word</p> <p>15 diversion at the top and then it says internet,</p> <p>16 pill mills --</p> <p>17 A. It could be criminal.</p> <p>18 Q. -- and so on, and then theft is the</p> <p>19 second from the bottom.</p> <p>20 MS. SACKS: What's the third one</p> <p>21 say?</p> <p>22 MR. BOEHRM: I think it says</p> <p>23 prescription scams, I believe.</p> <p>24 MS. SACKS: Deception?</p> <p>25 MR. BOEHRM: Oh, yeah, maybe it is</p>
<p style="text-align: right;">Page 263</p> <p>1 cultural mindsets about the use of prescription</p> <p>2 medications in general that have contributed to</p> <p>3 opioid abuse?</p> <p>4 MS. SACKS: Objection.</p> <p>5 A. I don't know.</p> <p>6 THE VIDEOGRAPHER: He had his hand</p> <p>7 on his microphone.</p> <p>8 MR. BOEHRM: When I was asking? Do</p> <p>9 I need to reask my question?</p> <p>10 THE VIDEOGRAPHER: Yes.</p> <p>11 Q. Do you believe that there are any</p> <p>12 cultural mindsets about the use of prescription</p> <p>13 medications in general in the United States</p> <p>14 that have contributed to opioid abuse?</p> <p>15 MS. SACKS: Objection.</p> <p>16 A. I am not aware of any.</p> <p>17 Q. Based on your many years as a</p> <p>18 partner of the Cuyahoga County Opiate Task</p> <p>19 Force and as the chief executive officer of the</p> <p>20 Cuyahoga County ADAMHS Board, are there any</p> <p>21 other factors that you believe have contributed</p> <p>22 to opioid abuse, addiction or overdose in</p> <p>23 Cuyahoga County that are not identified in this</p> <p>24 schematic on page 21 of the 2010 Ohio</p> <p>25 Prescription Drug Abuse Task Force report?</p>	<p style="text-align: right;">Page 265</p> <p>1 deception.</p> <p>2 MS. SACKS: I don't know what the</p> <p>3 second one, between the two of us.</p> <p>4 MR. BOEHRM: I think it is deception</p> <p>5 scam.</p> <p>6 MS. SACKS: Deception scam. Okay.</p> <p>7 Q. Okay. Do you have my question</p> <p>8 still in mind?</p> <p>9 A. Yes, I do. The only thing I would</p> <p>10 add on there, maybe for clarity, would be</p> <p>11 criminal activity.</p> <p>12 Q. All diversion is criminal activity</p> <p>13 in some form or another, correct?</p> <p>14 MS. SACKS: Objection.</p> <p>15 Q. Yes?</p> <p>16 A. Yes.</p> <p>17 Q. Anything else?</p> <p>18 A. That's it.</p> <p>19 MR. BOEHRM: All right. Let's go</p> <p>20 off the record.</p> <p>21 THE VIDEOGRAPHER: Off the record</p> <p>22 at 4:09.</p> <p>23 (Recess taken.)</p> <p>24 THE VIDEOGRAPHER: On the record,</p> <p>25 4:28.</p>

<p style="text-align: right;">Page 266</p> <p>1 Q. Thank you, Mr. Denihan. Welcome 2 back from another short break. I have only a 3 few questions left for you this afternoon. 4 You indicated earlier that you have 5 not read the written complaint that was 6 submitted by the county in connection with this 7 lawsuit, correct? 8 A. Correct. 9 Q. Do you know who the defendants are 10 in this lawsuit? 11 A. No. I heard one, Purdue. Did I 12 say that right, Purdue? 13 Q. Purdue, okay. Other than Purdue, 14 do you know any other defendants that have been 15 named in this lawsuit? 16 A. No, no, no. 17 Q. Do you have any understanding about 18 why defendants have been named as defendants in 19 this case? 20 MS. SACKS: Objection. 21 A. No, I don't. 22 Q. Have you ever heard of wholesale 23 drug distributors? 24 A. No. 25 Q. Do you know what the role of</p>	<p style="text-align: right;">Page 268</p> <p>1 this lawsuit? 2 A. No. 3 Q. Are you familiar with the specific 4 allegations that the county has made against 5 any defendant in this case? 6 A. No. 7 Q. Do you agree that pharmacies cannot 8 dispense a prescription opioid medication to a 9 patient without a valid prescription from a 10 licensed physician? 11 MS. SACKS: Objection. 12 A. I don't have an opinion. 13 Q. Well, I'm just asking whether you 14 know. Do you know -- 15 A. No, I don't know. 16 Q. You don't know? 17 A. I don't think so, no. 18 Q. Have you ever -- you're not aware 19 whether or not you have to have a prescription 20 for a medication to get a drug dispensed by a 21 pharmacist? 22 MS. SACKS: Objection. I think he 23 answered that. 24 A. I'm aware -- 25 Q. Let me ask it again. Let's clean</p>
<p style="text-align: right;">Page 267</p> <p>1 wholesale drug distributors is in the delivery 2 of healthcare in the United States? 3 A. Nope. 4 Q. Do you believe that wholesale drug 5 distributor companies are responsible in any 6 way for opioid abuse or overdoses in Cuyahoga 7 County? 8 A. No. 9 Q. Have you ever heard of Cardinal 10 Health? 11 A. I believe I have, yes. 12 Q. What do you know about Cardinal 13 Health? 14 A. Nothing. 15 Q. You have just heard the name? 16 A. Yes. 17 Q. Have you ever heard of McKesson? 18 A. Who? 19 Q. McKesson. 20 A. No. 21 Q. Have you ever heard of 22 AmerisourceBergen? AmerisourceBergen? 23 A. No. 24 Q. Are you aware of any pharmacy 25 defendants that have been named as parties in</p>	<p style="text-align: right;">Page 269</p> <p>1 it up. 2 My question is this: Do you agree 3 that a pharmacy cannot dispense a prescription 4 opioid medication without a valid prescription 5 from a licensed doctor? 6 A. Yes. 7 MR. BOEHM: I don't have any more 8 questions for you right now. I'll look at my 9 colleagues and see if they do around the table. 10 EXAMINATION OF WILLIAM DENIHAN 11 BY MS. STEINMETZ: 12 Q. Good afternoon, Mr. Denihan. My 13 name is Jennifer Steinmetz. I represent the 14 defendants Janssen and Johnson & Johnson in 15 this lawsuit. I just have a couple follow-up 16 questions for you, okay? 17 You mentioned Purdue specifically, 18 but do you know the specific allegations made 19 against Purdue or any of the pharmaceutical 20 manufacturers in this lawsuit? 21 A. No. 22 Q. Are you aware of any specific 23 conduct by any of the pharmaceutical 24 manufacturer defendants that resulted in harm 25 to Cuyahoga County?</p>

<p style="text-align: right;">Page 270</p> <p>1 A. No.</p> <p>2 Q. Are you aware of any specific</p> <p>3 statements made by any of the pharmaceutical</p> <p>4 manufacturer defendants regarding the</p> <p>5 addictiveness or the nonaddictiveness of</p> <p>6 prescription opioids?</p> <p>7 A. No.</p> <p>8 Q. Do you know what pharmaceutical</p> <p>9 manufacturers do in their day-to-day business?</p> <p>10 MS. SACKS: Objection.</p> <p>11 A. Not really.</p> <p>12 Q. Do you know the names of any of the</p> <p>13 drugs that were made by the manufacturer</p> <p>14 defendants in this lawsuit?</p> <p>15 MS. SACKS: Objection.</p> <p>16 A. No.</p> <p>17 MS. STEINMETZ: Those are all the</p> <p>18 questions I have for you today, Mr. Denihan.</p> <p>19 Thank you for your time today.</p> <p>20 MR. BOEHM: Let's check to see if</p> <p>21 anybody has any questions on the phone. Any</p> <p>22 lawyers on the phone have questions?</p> <p>23 MR. ANDERSON: This is Jon</p> <p>24 Anderson. I have none.</p> <p>25 MR. ZIPP: This is John Zipp. I</p>	<p style="text-align: right;">Page 272</p> <p>1 Whereupon, counsel was requested to give</p> <p>2 instruction regarding the witness's review of</p> <p>3 the transcript pursuant to the Civil Rules.</p> <p>4</p> <p>5 SIGNATURE:</p> <p>6 Transcript review was requested pursuant to the</p> <p>7 applicable Rules of Civil Procedure.</p> <p>8</p> <p>9 TRANSCRIPT DELIVERY:</p> <p>10 Counsel was requested to give instruction</p> <p>11 regarding delivery date of transcript.</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>
<p style="text-align: right;">Page 271</p> <p>1 have none.</p> <p>2 MR. BOEHM: Sounds like we don't</p> <p>3 have any from attorneys on the phone.</p> <p>4 Shayna, do you have any questions?</p> <p>5 MS. SACKS: I do not.</p> <p>6 MR. BOEHM: So I think you are</p> <p>7 done, sir. Thank you very much for your time.</p> <p>8 THE VIDEOGRAPHER: Off the record</p> <p>9 at 4:33.</p> <p>10 (Deposition concluded at 4:33 p.m.)</p> <p>11 - - - - -</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 273</p> <p>1 REPORTER'S CERTIFICATE</p> <p>2 The State of Ohio,)</p> <p>3 SS:</p> <p>4 County of Cuyahoga.)</p> <p>5</p> <p>6 I, Wendy L. Klauss, a Notary Public</p> <p>7 within and for the State of Ohio, duly</p> <p>8 commissioned and qualified, do hereby certify</p> <p>9 that the within named witness, WILLIAM DENIHAN,</p> <p>10 was by me first duly sworn to testify the</p> <p>11 truth, the whole truth and nothing but the</p> <p>12 truth in the cause aforesaid; that the</p> <p>13 testimony then given by the above-referenced</p> <p>14 witness was by me reduced to stenotypy in the</p> <p>15 presence of said witness; afterwards</p> <p>16 transcribed, and that the foregoing is a true</p> <p>17 and correct transcription of the testimony so</p> <p>18 given by the above-referenced witness.</p> <p>19 I do further certify that this</p> <p>20 deposition was taken at the time and place in</p> <p>21 the foregoing caption specified and was</p> <p>22 completed without adjournment.</p> <p>23</p> <p>24</p> <p>25</p>

<p style="text-align: right;">Page 274</p> <p>1 I do further certify that I am not</p> <p>2 a relative, counsel or attorney for either</p> <p>3 party, or otherwise interested in the event of</p> <p>4 this action.</p> <p>5 IN WITNESS WHEREOF, I have hereunto</p> <p>6 set my hand and affixed my seal of office at</p> <p>7 Cleveland, Ohio, on this 4th day of</p> <p>8 February, 2019.</p> <p>9</p> <p>10</p> <p>11</p> <p>12 </p> <p>13 Wendy L. Klauss, Notary Public</p> <p>14 within and for the State of Ohio</p> <p>15</p> <p>16</p> <p>17 My commission expires July 13, 2019.</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 276</p> <p>1 DEPOSITION REVIEW</p> <p>2 CERTIFICATION OF WITNESS</p> <p>3 ASSIGNMENT REFERENCE NO: 3207639</p> <p>4 CASE NAME: In Re: National Prescription Opiate Litigation v.</p> <p>5 DATE OF DEPOSITION: 1/30/2019</p> <p>6 WITNESS' NAME: William Denihan</p> <p>7 In accordance with the Rules of Civil</p> <p>8 Procedure, I have read the entire transcript of</p> <p>9 my testimony or it has been read to me.</p> <p>10 I have made no changes to the testimony</p> <p>11 as transcribed by the court reporter.</p> <p>12</p> <p>13 Date <u>William Denihan</u></p> <p>14 Sworn to and subscribed before me, a</p> <p>15 Notary Public in and for the State and County,</p> <p>16 the referenced witness did personally appear</p> <p>17 and acknowledge that:</p> <p>18 They have read the transcript;</p> <p>19 They signed the foregoing Sworn</p> <p>20 Statement; and</p> <p>21 Their execution of this Statement is of</p> <p>22 their free act and deed.</p> <p>23</p> <p>24 I have affixed my name and official seal</p> <p>25 this _____ day of _____, 20____.</p> <p>_____</p> <p>Notary Public</p> <p>_____</p> <p>Commission Expiration Date</p>
<p style="text-align: right;">Page 275</p> <p>1 Veritext Legal Solutions</p> <p>2 1100 Superior Ave</p> <p>3 Suite 1820</p> <p>4 Cleveland, Ohio 44114</p> <p>5 Phone: 216-523-1313</p> <p>6 February 4, 2019</p> <p>7 To: Shayna E. Sacks</p> <p>8 Case Name: In Re: National Prescription Opiate Litigation v.</p> <p>9 Veritext Reference Number: 3207639</p> <p>10 Witness: William Denihan Deposition Date: 1/30/2019</p> <p>11 Dear Sir/Madam:</p> <p>12 Enclosed please find a deposition transcript. Please have the witness</p> <p>13 review the transcript and note any changes or corrections on the</p> <p>14 included errata sheet, indicating the page, line number, change, and</p> <p>15 the reason for the change. Have the witness' signature notarized and</p> <p>16 forward the completed page(s) back to us at the Production address</p> <p>17 shown</p> <p>18 above, or email to production-midwest@veritext.com.</p> <p>19 If the errata is not returned within thirty days of your receipt of</p> <p>20 this letter, the reading and signing will be deemed waived.</p> <p>21 Sincerely,</p> <p>22 Production Department</p> <p>23</p> <p>24</p> <p>25 NO NOTARY REQUIRED IN CA</p>	<p style="text-align: right;">Page 277</p> <p>1 DEPOSITION REVIEW</p> <p>2 CERTIFICATION OF WITNESS</p> <p>3 ASSIGNMENT REFERENCE NO: 3207639</p> <p>4 CASE NAME: In Re: National Prescription Opiate Litigation v.</p> <p>5 DATE OF DEPOSITION: 1/30/2019</p> <p>6 WITNESS' NAME: William Denihan</p> <p>7 In accordance with the Rules of Civil</p> <p>8 Procedure, I have read the entire transcript of</p> <p>9 my testimony or it has been read to me.</p> <p>10 I have listed my changes on the attached</p> <p>11 Errata Sheet, listing page and line numbers as</p> <p>12 well as the reason(s) for the change(s).</p> <p>13 I request that these changes be entered</p> <p>14 as part of the record of my testimony.</p> <p>15</p> <p>16 I have executed the Errata Sheet, as well</p> <p>17 as this Certificate, and request and authorize</p> <p>18 that both be appended to the transcript of my</p> <p>19 testimony and be incorporated therein.</p> <p>20</p> <p>21 Date <u>William Denihan</u></p> <p>22 Sworn to and subscribed before me, a</p> <p>23 Notary Public in and for the State and County,</p> <p>24 the referenced witness did personally appear</p> <p>25 and acknowledge that:</p> <p>They have read the transcript;</p> <p>They have listed all of their corrections</p> <p>in the appended Errata Sheet;</p> <p>They signed the foregoing Sworn</p> <p>Statement; and</p> <p>Their execution of this Statement is of</p> <p>their free act and deed.</p> <p>I have affixed my name and official seal</p> <p>this _____ day of _____, 20____.</p> <p>_____</p> <p>Notary Public</p> <p>_____</p> <p>Commission Expiration Date</p>

<p style="text-align: right;">Page 278</p> <p>1 ERRATA SHEET 2 VERITEXT LEGAL SOLUTIONS MIDWEST 3 ASSIGNMENT NO: 1/30/2019 4 PAGE/LINE(S) / CHANGE /REASON 5 _____ 6 _____ 7 _____ 8 _____ 9 _____ 10 _____ 11 _____ 12 _____ 13 _____ 14 _____ 15 _____ 16 _____ 17 _____ 18 _____ 19 _____ 20 Date William Denihan 21 SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ 22 DAY OF _____, 20_____. 23 _____ 24 Notary Public 25 _____ Commission Expiration Date</p>	

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Page 1

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[1999 - 3,927,331]

Page 2

1999 29:17 30:16 1:17 1:15 1:34 161:6 2 2 4:3 5:6 54:23 55:8 63:16 68:5 74:18 79:6 149:13 149:20 150:6 182:12 202:3 2,125,000 135:7 2,625,000 134:22 136:15 2,647,277 132:25 2/12/2007 6:5 177:13 20 6:20 65:19 77:24 144:13 146:12 179:24 234:12,22 276:16 277:22 278:22 200 11:10 2000 29:17 32:8 77:20 20001-2113 2:20 20001-4956 3:11 20005 2:10 2001 29:17 37:10 38:21 2002 22:23 162:15 162:24 179:24 2003 39:14 164:2 164:11 165:9,15 166:7 2004 39:22 40:11 2005 39:22 40:11 2007 178:1,16,21 180:5,13,20 181:2 181:9,15 2008 22:10 154:9 157:10	2009 21:25 22:11 22:11,14,24,25 23:9 28:20 42:2 113:21 2010 5:23 7:6 74:14 166:15 167:1,12 168:9,16 168:24 169:20,24 170:7 171:10 172:11,19 173:19 174:22,23 175:23 176:19 242:6,12 244:5,11 245:5 252:8,15,21 253:4 262:11 263:24 2011 142:25 144:4 144:25 155:17 156:19 175:25 2012 55:12 56:2,22 63:22 64:3 66:15 66:19 67:3 73:2 78:6,12 85:21 88:25 89:2 95:21 97:10,22 102:21 103:23 105:1 106:20 107:19 113:22 124:13,15 2013 6:11 125:14 161:12,17 162:24 164:3,11 165:9,15 166:7 182:9 184:19 185:16 189:21 201:7 208:10,20 209:16 2014 48:3 49:3 234:19 236:25 2015 110:22 125:14 243:12 244:1,5 245:5,7,22 246:2,5,11	2016 42:2 108:20 243:2 2017 7:2 23:15,17 23:24 105:18 106:21 107:19 131:14 223:19,21 232:7 247:5,11,20 248:6 2019 1:20 14:3 274:8,17 275:4 202 2:11,20 3:11 203 11:11,12,13 204 11:14 206 11:15,16 207 11:17,18 208 6:11 11:19 21 146:24 253:1,10 262:11 263:24 212 2:5 3:17 65:5 65:12 67:9 77:25 213 11:20,21 214 11:22,23 215 11:24 67:9 216 2:16 216-523-1313 275:3 22 119:11 221 11:25 222 12:1 2222 274:13 223 6:16 12:2 224 12:3 225 12:4 226 12:5,6 23 8:3 232 12:7 233 12:8,9,10,11 234 6:19 12:12,13 238 12:14 239 12:15	240 12:16,17,18,19 241 12:20 242 6:23 12:21 244 12:22 246 12:23 247 7:1 25 65:19 146:18 225:12 229:15 25,000 233:6 250 3:16 12:24,25 13:1 250,000 135:2,5 140:20,22,25 233:6 251 13:2 252 7:4 13:3 25301-3202 3:5 255 13:4,5,6 256 13:7,8 257 13:9,10 258 13:11,12 260 13:13 261 13:14,15,16 262 13:17 263 13:18,19 265 13:20 266 13:21 268 13:22,23 269 4:9 27 5:3 75:8 270 13:24,25 273 4:11 28 7:2 247:5,20 2804 1:7,9 3 3 5:9 108:3,17 127:6 192:12 202:4 243:21 245:17 3,927,331 134:20
---	--	---	--

[30 - abuse]

Page 3

30 1:20 14:2 22:10 22:23 144:12 149:4 236:3,12 300 39:6,13,24 301 3:21 304 3:6 3207639 275:7 276:2 277:2 340-1169 3:6 35th 3:20 36 8:4 360 2:4 37 8:5 3805 82:21 3806 82:21 3817 85:12 39 8:6 397-1000 2:5 3:13 235:8 3:28 235:11	471-3490 3:22 4940 225:1 4:09 265:22 4:28 265:25 4:33 271:9,10 4th 274:7	62.68 162:18 63 8:10,11 249:7 6541 155:4 66 8:12 662-6000 3:11 67 8:13	91 8:25 9:1 92 9:2 93 9:3 936,550 56:23 94 9:4,5 950 1:22 2:15 98 9:6,7,8,9,10 99 9:11 9:02 1:20 14:2 9:57 53:24
	5	7	a
	5 4:5 5:16 142:8 142:17 179:5 190:17 235:1 5/16/2011 5:16 142:9 5/18/2017 6:16 223:10 50 35:5 41:2 65:3 65:4,5,12 50,000 106:18 500 3:5 505 82:17 84:17 51 2:19 53 8:8 54 5:6 55th 3:16 591,550 58:4,19 59:6,11 592-5000 2:16 5:15 209:16	7 5:23 166:14,24 168:3 7/28/2017 7:1 247:3 700 39:5,12,23 70s 35:5 725 2:10 75 146:11,17 78 8:14	a.m. 1:20 75:8 abc 204:16 ability 19:1 38:6 110:4 163:8 166:8 194:2 198:5 able 18:21 25:9 45:17 58:24 59:5 59:9 62:21 89:16 90:5 111:18,24 125:6 126:19 127:12 133:3 198:22 199:5,13 202:24 221:6 absolutely 58:16 227:7 235:5 abuse 7:4 32:20 35:18 36:1,8,18 46:7,18,25 47:8,18 48:6,12,17,21 49:2 50:4 51:19 52:13 52:19 57:22 58:1 60:24 61:5 62:10 63:11 64:12,18 77:11 78:10 84:10 84:14 89:6 90:17 98:21 99:4 103:15 104:4 105:4,24 107:2,18 114:11 114:17 116:18,22 117:7 119:23
	6	8	
	6 5:19 160:22 161:11 162:9 179:5,16,17 184:25 190:17 209:16 236:3,12 237:1 6/16/2017 5:13 131:6 60 61:24 62:4,4,8 61 54:9,10 62 8:9	8 6:2 174:14,22 176:19 8/26/2014 6:20 234:11 8/31/16 6:23 242:16 80 8:15 128:3 146:12 805 78:22 79:1 836-8000 3:17 84 8:16,17 850 3:10 86 8:18 87 8:19,20,21,22 879-3939 2:20 88 41:3 89 8:23	
		9	
		9 6:5 177:12,21 90 8:24 61:24 128:3 900,000 120:21,25	
4 5:12 39:14,14 68:6 131:2,5,25 134:19,19 139:1 243:21 244:1 245:1,7,17 246:1 275:4 4/10/2013 5:20 160:23 4/27/2010 6:2 174:15 40 35:5 77:25 119:10 412 3:22 434-5000 2:11 44 8:7 44113 2:15 44114 275:2 45 225:13 45004 1:15			

[abuse - addiction]

Page 4

121:1,1 122:19 132:16 141:6 148:6 151:17 152:1 156:12 157:5,11 163:9 166:9 167:13 168:8,18,21 169:10 170:1,10 171:1,12 172:14 172:25 173:15,20 173:24 176:13,21 177:5 179:23 180:12 181:4,16 183:10 184:7 187:15 188:3 191:17 192:22 193:6 194:16 197:17,20 199:6 199:25 201:9,15 201:24 206:13,24 207:8 210:5,10 212:21 220:12 223:25 225:25 226:8,13 227:4,5 227:10,11 230:6,7 230:10,18 237:20 237:25 238:5 239:6,12,22 240:10,24 252:6 252:16,20 253:4,6 254:3,8,25 256:14 257:3,24 260:6 262:12,18 263:3 263:14,22,25 267:6 abused 35:7 100:19 102:7 233:14 abusers 228:13,21 228:24 240:14	abusing 98:2,8 100:9,14 101:4,19 250:18,25 accept 138:13 153:22 accepted 76:25 access 213:3 214:15 accessible 240:14 accidental 67:7,14 67:15,18,22 accidents 67:9 account 82:17 195:3 262:1 accountable 153:11 accounts 120:12 accreditation 171:17 achieve 237:15 acknowledge 276:11 277:16 acronym 20:11 175:11 act 43:16,17 76:22 135:8 136:6 140:6 140:13 152:3,4,7 185:23,24 186:2 188:19 207:24 219:18,19 221:7 276:14 277:20 acted 138:15 acting 31:4,8,22 31:25 action 44:5,7 160:10 274:4 actions 35:12 207:18 active 73:9,22,23 74:25 75:15 76:4 87:17 171:23	187:23 192:15 193:15 194:25 196:10 activities 29:6,12 30:20 119:22 237:23 238:3 239:4,10,19 activity 227:22 265:11,12 actual 204:2 244:17 adamha 41:3 adamhs 5:10 6:20 19:7,17 20:6,10,11 20:15,23 21:14,20 21:23 22:12,13 23:2,8,13,20 27:25 28:11,18,23,25 29:4,6 41:10 42:6 42:15,23 44:16,25 45:4,9,11 46:4,4 46:15,23 47:6,16 48:4,19,25 49:6 50:2 51:7 52:12 56:7,9,22 58:4,18 59:11 60:15,16 62:13 63:23 64:2 64:9 66:17 67:12 67:13,21 69:22 73:19 75:13 79:8 79:9 80:11,13 82:2,9,10 83:6 87:9 89:9 90:14 92:24 100:1 102:11 103:10,12 104:1 105:2,21 106:20,21,25 107:15 108:5,18 109:7,11,19 110:12,14,21 111:8,19 112:8,11	112:18 113:7,10 114:10,16 116:4 116:14 117:5,17 118:15 119:2,21 120:6,18 121:9 122:17 123:19,22 124:6,20 125:7,13 126:9 127:11,19 129:2,17 130:1,8 132:12 133:7,13 134:12,23 136:16 136:22 139:3,8,16 139:16 140:14 141:1,4 150:20 154:22 155:23 156:6 157:18 158:1,16 159:15 160:6,7,13 161:13 161:19 163:7,13 164:1,10,22 165:7 165:14 166:5,8 170:19,24 172:14 172:20 173:6,11 187:21 193:16 195:2 196:9 198:8 202:10 203:4,9,18 209:25 211:11 213:2 218:16 221:5 222:20,23 222:24 234:12 243:8 244:15 263:20 add 265:10 added 54:16 250:7 250:11,17 addicted 64:6 98:15 157:17 179:18 180:7 229:4 240:3 addiction 5:20 6:13 20:16,22
---	--	---	--

21:1,5,21 28:10 29:10 32:20 36:18 44:13 49:17 51:19 57:19 61:16 62:3 68:19 87:15 98:3 98:9 100:5,10,16 100:20 104:4 105:5,24 107:2,18 114:11 119:24 122:19 127:16,24 127:25 128:7,8,19 141:6 145:8,15,25 146:13,19 147:8 150:21 152:14 155:12 160:25 162:16,22 180:22 182:15 184:17 200:17 201:24 207:8 208:12 210:15 211:13 227:4 263:22 addictions 19:9 addictive 192:16 addictiveness 270:5 addicts 95:20 97:11,23 addition 250:1 additional 48:10 56:19,24 57:8 68:6 103:14 104:20 134:22 136:16 180:17 address 36:10 47:8,18 48:5,21 49:2 52:19 63:18 63:24 64:15 69:13 69:24 89:16 104:3 105:4,23 107:2,17 116:23 141:6 169:24 172:1,14	196:16 199:6,13 199:25 226:13 275:15 addressed 34:7,15 addressing 50:3 51:19 103:15 116:7,17 176:13 198:23 212:20 adjournment 273:22 administered 91:7 administration 50:23 51:1 86:20 165:17,21 193:5 administrative 44:7 247:17 administrator 195:19 213:25 adopt 189:24 190:22 adopted 259:4 adoption 35:14 60:5 advertisements 103:5 153:23 advertising 204:10 204:14,15,19 advice 41:17 188:25 advisory 32:7,11 32:13,16,19 advocacy 82:16 153:5 183:14 affairs 5:10 26:16 108:5,25 109:1,7 109:12,21 110:1,4 110:6 127:10 affect 38:15 affiliated 22:16 affiliation 33:18 33:22	affirm 59:14 affirming 226:4 affixed 274:6 276:15 277:21 affordable 43:16 43:17 aforesaid 273:12 african 230:22 249:23 afternoon 266:3 269:12 age 15:4 agencies 153:8 agency 232:18 256:20 257:2,22 258:12 ages 225:12 aggregate 258:9 aggressive 254:3,7 ago 33:24 35:5 43:14 54:15 103:21,24 105:8 105:14 229:14 230:2 agree 50:24 53:8,8 89:14,18 90:5 91:23 92:7 95:23 98:1,7,19,24 100:8 100:12 101:3,10 101:12,18 128:8 128:13 133:6 148:4 169:22 170:6,23 171:3,5 181:1,7 186:25 189:2 192:9,24,25 193:1 194:3,4,6 199:4 200:22 201:5 202:17 207:21 233:7 237:23 238:3,16 239:4,19 240:13	240:18,23 241:8 241:17,21,23 242:3 245:11 246:14,19,21,22 246:24 256:8 260:22,23 261:3,9 261:17,23 268:7 269:2 agreed 198:21,25 agreement 192:15 ahead 18:8,13 85:7 115:19 174:5 198:17 207:3 213:20 215:9 228:7 231:15 243:25 al 1:13,14 alcohol 20:15 21:3 22:1 28:9 32:7,11 32:19 35:19 36:7 36:11,18 127:16 127:25 128:3,8,19 156:22,25 162:16 181:11 allegations 19:22 20:1 235:19 236:2 268:4 269:18 allocated 81:19 151:11 allocation 29:7 allow 39:22 54:8 allowed 218:18 altered 207:13 amended 144:5 america 40:15,18 153:3 american 230:22 249:23 amerisourceberg... 3:2 14:20 267:22 267:22
--	--	---	--

[amount - attachment]

Page 6

amount 42:15 80:10 81:19 82:3 82:3,9 120:8,9,11 133:11 137:6,7 194:20 197:8 202:7 213:1 amounts 190:3 analgesics 179:19 analysis 5:10 108:6,18 109:8 anderson 3:4 14:19,19 270:23 270:24 announcements 117:3 annual 56:12,13 104:7,14,15 106:1 106:3,9 answer 16:25 17:3 17:23,23 18:9,13 62:22,23 68:10 76:20 83:20 94:14 105:11,25 127:12 137:17,20 147:13 147:25 148:3,9,9 152:2,5 154:4,6 181:7 187:18 189:12 199:22 213:19 228:15 238:25 239:2,18 257:20 259:19 answered 128:15 158:9 207:2 268:23 answering 199:20 answers 158:14,15 anticipated 50:11 anybody 24:16 52:1 64:9 90:20 127:11 155:23 198:8,11 255:12	270:21 anymore 44:21,22 83:19 anyway 236:15 apologize 33:6 215:12 apparently 168:23 appear 276:11 277:15 appearances 2:1 3:1 4:3 appeared 147:1 appears 55:14 56:21 79:19 132:22 144:3 246:1 appended 277:11 277:18 applicable 272:7 applications 42:20 86:24 applied 95:12 apply 23:5 appointed 29:11 32:6 apportioned 138:6 appreciate 72:10 apprehension 35:1 approach 228:2 appropriate 164:18 181:2 196:23 202:20 262:8 appropriately 199:5 216:5 appropriateness 202:12 approval 86:19,23 159:6 192:20 approve 59:10 69:11 86:25	approved 69:22 91:14 92:9 94:4 136:9,10 151:1,2 165:21 192:13,23 205:6 approximately 62:8 120:25 133:23 164:2,2 165:9,25 166:7 194:19 195:3 april 161:11 174:23 176:19 area 34:1 48:11 52:20 181:9 areas 104:11 164:7 armond 232:23 247:23 arnold 3:15 15:2 arnoldporter.com 3:18 arresting 227:14 aside 103:9,23 140:2 174:11 177:10 208:6 asked 19:4,12,14 53:3 75:4 97:4,5 105:9 113:17 121:24 125:15 137:5 141:4 158:11 188:12 198:21 222:6 237:18 238:14,15 asking 57:12 82:16 97:18 115:2 145:22 148:19 172:8 187:20 193:13,14,17 195:11 202:9 245:13 256:6 263:8 268:13	assemble 221:22 assembly 41:5 44:4,9 83:16 141:19 183:1,15 183:25 185:23 188:15,18 194:4 207:22 222:25 assess 193:20 197:18 202:11 assesses 203:19 assessment 192:10 asset 109:18 assign 195:3 assignment 276:2 277:2 278:2 assistant 75:20,21 247:18,23 248:18 assisted 49:20 105:12 106:22 115:20 132:23 133:8,15 134:7 associated 40:20 association 25:7 34:3 40:20,25 41:4,8,23 175:12 178:17 184:11 athens 80:21 attached 78:16 131:24 170:11 176:24 223:19 248:23 249:3,4 277:7 attaches 55:11 243:11 attachment 5:3,7 5:14,18,21,25 6:3 6:6,9,14,18,24 7:2 27:5 55:1 131:8 142:12 161:1,12 161:25 166:18 174:17 177:15
---	---	--	---

[attachment - believe]

Page 7

178:13 179:5 182:2 184:13 208:14 223:12 242:18 247:5 248:4 249:13,14 attend 24:17 attention 28:1 55:23 58:14 78:15 94:23 179:4 184:24 185:18 209:13 230:24 236:22 237:12 249:13 attorney 75:21 195:18 274:2 attorneys 24:13 271:3 audience 224:3 august 23:15,16 23:24 234:19 236:25 243:1 author 27:19,22 authored 178:16 247:12 authorities 40:21 41:1,9,24 175:13 178:18 204:1 authority 205:5 authorize 277:11 authorized 86:10 automobile 65:17 65:22 available 42:16,23 79:9 111:9 114:12 139:17 140:14 ave 275:1 avenue 1:22 2:4,15 2:19 217:4 awake 154:13 award 151:9	awarded 54:14 awarding 149:3 151:5 awards 111:15 146:11 aware 19:19,23 186:10,14 204:4 204:18,24 205:4,7 205:14,21 206:3 231:20 241:12 244:14,18 250:22 263:16 267:24 268:18,24 269:22 270:2 awareness 64:5 69:2,4,5 71:18 72:20 102:23 b b 236:3,12 baby 262:13,17 bachelor's 54:9 back 38:21 44:22 48:10 54:3 63:16 68:5 79:4 95:1 99:24 108:12 109:24 111:6 123:10,17 133:4 139:1 152:17 154:8 161:7 167:1 170:16 171:10 198:20 204:17 217:6 219:8,15 233:25 234:5 235:14 236:16,25 249:9 266:2 275:15 background 26:4 173:5 189:14 194:8 197:2 backlog 123:11	bad 84:3 93:4,6 baker 183:2,6,6,9 183:16 220:25 barking 34:8 base 40:8,9,11,15 based 53:6 60:22 61:8 62:13 68:14 132:23 133:9,15 134:7 187:20 263:17 basic 16:19 basing 102:2 basis 29:12 56:12 56:13 66:3,16,21 79:10 118:16 119:4 157:25 bates 5:4,8,11,14 5:18,22,25 6:4,7 6:10,14,18,21,25 7:3,6 27:6 55:2 78:22 82:21 85:11 108:6 131:9 142:12 161:1 166:19 174:17 177:16 182:3 208:14 223:13 224:24,25 234:13 242:19 247:6 252:9 bathroom 255:20 becoming 49:18 49:19 64:6 bed 126:3 beds 47:11 49:9,13 49:15,18,20,21 89:20 103:21,25 104:8 105:13,13 106:5,22 107:20 115:20,21 122:17 122:18 123:8,24 125:23 126:1	132:8,16,24 133:9 133:16 134:8 began 100:14 124:12 157:10 190:2 199:17 242:10 beginning 5:4,7,11 5:14,18,21,25 6:3 6:6,9,14,18,21,24 7:3,6 22:12 27:6 55:1 64:23 68:12 95:16 108:6 117:22 131:8 142:12 161:1 166:19 174:17 177:15 182:3 208:14 223:13 234:13 235:16 242:18 247:6 252:9 begins 162:1 begun 101:4,19 behalf 2:2,7,13,17 3:2,7,13,19 14:14 14:17,20,22,25 15:2 56:22 63:22 167:11 169:6 171:19 172:11 178:17 184:10 222:23 behavioral 22:5,7 40:21 41:1,8,24 146:10,10 149:9 175:13 178:18 believe 19:24 37:2 47:20 59:13 68:11 74:11 77:9 80:5 86:6 97:21 110:3 112:14 114:9 122:3 124:16 125:10 127:2
---	--	---	---

133:11,17 138:15 139:19 143:10,18 145:12 148:3 152:11 156:9,10 157:9 170:11 171:16 192:19 193:4,9 195:12 196:7 197:3,15 201:12,19 202:10 207:6,16 209:6 212:15 215:21 218:17 220:9 221:4,14 232:15 235:12 236:17 244:24 245:4,14 245:20 251:12,18 257:1,21 260:3,20 262:25 263:11,21 264:3,23 267:4,11 believed 169:25 170:9 bell 186:9 255:4 belly 57:7 58:7,22 benefits 40:5 260:25 best 17:13 67:19 68:13 72:9 75:2 96:2 97:7 152:9 199:24 202:18 203:13 better 34:25 46:10 53:13 87:8 96:9 beyond 140:25 bid 112:2 biennial 144:7 big 38:19 153:3 217:10 220:17 biggest 227:18 bill 28:3,8 144:5,7 billboards 103:3	bills 41:5 bio 5:4 27:5 biography 27:15 27:24 28:22 29:24 30:2 31:3 32:5,22 bit 20:12 28:7 38:23 42:24 59:3 76:15 111:13 112:4 139:24 151:24 154:25 174:25 179:22 188:11 230:25 252:17 black 83:17 117:20 blank 138:10 blood 189:25 board 5:10 19:7 19:17 20:6,10,13 20:15,16,24 21:14 21:20,23 22:1,11 22:12,14,20,22 23:2,3,8,14,20 27:25 28:11,13,18 28:23,25 29:4,6,11 29:22 32:7,12,19 33:25 42:6,24 43:3 44:16,25 45:4,9,12 46:4,4 46:15,15,23,23 47:6,6,17 48:4,19 48:25 49:6 50:2 52:13 56:7,23 58:4,18 60:1,15,17 62:14 63:23 64:2 66:17 67:12,13,21 73:8,19 75:13 79:8,9 80:11,20,21 81:19 82:9,10 87:9 89:9 90:14 92:24 100:1	102:12 103:10,12 104:1 105:2,21 107:15 108:5,18 109:7,11,19 110:12,14,21 111:9,20 112:8,11 112:18 114:10,13 114:16 116:4,14 117:5 118:15 119:2 120:18 121:9 122:17 123:19,22 124:6 124:20 125:8,13 126:9 127:12,19 129:2,18 130:1,8 132:13 133:7 134:12,23 136:17 136:22 139:16,16 141:1,4 150:20 154:22,23 155:23 156:6 157:19 158:1,17 163:13 164:1,10,23,24 165:7,14 166:5 170:19,24 172:14 172:20 173:7,8,12 181:11 187:21 189:22 190:21 191:3 193:16 195:2 196:10 198:8 202:11 203:4,9,18 207:7 207:12,17 208:25 209:25 213:2 217:19 218:16 221:5 222:20,23 222:24 243:8 244:16 263:20 board's 59:11 69:22 133:14 140:15 163:8	166:8 boards 21:25 22:3 22:9,17 23:1,10 32:13 41:2,10 42:19 80:13 82:2 83:6 143:8 202:16 220:15 body 22:6 41:18 41:19 boehm 2:9 4:8 14:10,10 15:10,15 53:21 59:2 78:23 107:23 125:17 157:25 158:6,11 160:16 182:19 196:23 209:6 219:12 224:21,25 235:5,12,22,24 236:10,14 238:9 249:8 263:8 264:22,25 265:4 265:19 269:7 270:20 271:2,6 bold 171:21 bombarded 206:18 boomers 262:13 262:17 bottom 65:25 80:16 85:11 110:10 155:4 262:13 264:19 bound 261:4 box 264:14 boxes 253:12 254:1 262:10 boy 148:22 brady 37:17 51:14 159:3 222:13 brain 22:6 222:7
---	--	--	--

[brand - cetera]

Page 9

brand 68:22 break 34:9 54:4 108:12 112:3 145:4 146:6 147:15 154:1 170:5 188:10 235:4 236:17 266:2 breaking 34:21 255:14 breaks 102:22 104:10 breathing 190:1 brickner 130:13 130:22 131:19,25 132:24 bridgeway 57:3,5 57:6,9,11,15,21 58:2,5,20 59:12 brief 27:15 bring 22:3 25:23 85:2 94:2 bringing 76:21 broadcast 234:25 broke 161:14 brought 19:9 35:15 148:2 budget 5:7 55:1,11 56:9,16,18 104:15 106:2,3 113:5,8,11 117:17,23,25 134:11 138:19 139:12 144:7,12 159:5 budgeting 51:6,7 130:20 budgets 104:7,14 106:9 117:23 137:11 151:5 budish 232:23 247:23	building 69:2 bulk 135:11 bullet 85:25 94:24 95:2,6 179:17 180:15 225:2,11 231:5,13 232:21 237:6,7,8,9,10,13 238:20 bulleted 164:8 burdens 180:17 burling 3:9 14:25 bus 103:3 business 57:7 226:25 270:9 busy 198:16 c c 33:2,4 135:9 ca 275:25 cabinet 255:21 cain 3:20,22 14:21 14:22 call 99:13 205:5 211:8 212:23 called 15:5 45:14 57:3 249:14 campaign 37:25 63:17,24 64:8 69:1,12,23 70:7 71:1,18,22 72:21 72:21,23 73:1,23 75:6 102:23 campbell 37:15,16 39:9,12 candidate 37:9 candidly 181:8 capability 193:20 capable 194:9 capacity 77:4 187:25 193:17 capita 82:3,4,10 83:6	caption 273:21 cardinal 2:7 14:11 267:9,12 care 35:13,16 43:16,17 60:5 86:13 123:10 career 65:16 150:24 153:7 carfentanil 93:22 93:25 94:4,10,15 94:19 carries 253:1 carroll 7:2 247:4 247:19,22 248:22 carry 152:6 cars 34:8 cartel 237:14 cartels 87:17 237:19,24 238:15 239:10,16,20 250:7,12 case 1:8,15 19:9 19:20 36:13,17 60:7,9 72:14,15 178:15 235:18 236:2,6 262:8 266:19 268:5 275:6 276:3 277:3 cases 16:4,6 cassandra 113:21 catastrophic 39:6 categories 111:16 126:9,20 categorize 251:9 categorizes 125:13 category 125:24 127:5 132:22,25 catholic 122:3 caucasian 226:1,9 caucasians 225:12 225:21	caucus 83:16,17 caught 89:24 cause 67:6 90:7,15 273:12 caused 43:20 44:4 44:5 94:20 244:4 causes 46:7,18 67:15,23 89:10,15 90:8,22 92:16 173:3,15 210:4 causing 40:10 cease 33:21 center 3:10 5:10 108:4,24 109:1,6 109:12,20,25 110:3 127:10 centered 226:9 230:18 centre 3:20 ceo 19:16 23:2,8 23:13 28:12 87:8 119:6 129:17,25 130:7,11 132:12 170:24 172:13,20 173:11 187:21 193:16 195:1 196:9 243:7 certain 26:23 128:2 certainly 144:21 152:16 certificate 4:11 273:1 277:11 certification 276:1 277:1 certified 15:7 202:16 certify 273:8,19 274:1 cetera 66:2 179:20
--	--	--	--

chain 217:7 219:8 chair 51:11,14 183:24 184:22 champion 159:3 chance 55:18,19 132:3 167:8,16,24 185:4,15 209:9,14 243:24 252:18 change 43:1,12,13 43:19,20 44:4 76:25 81:13 137:11,16,20 153:2 159:7 176:2 207:19 275:13,14 277:8 278:3 changed 44:5 186:11 189:9 207:25 227:13 changes 84:2 111:25 118:13 187:1,12 188:1 191:13 227:16,25 227:25 229:5 253:21 275:12 276:7 277:7,9 changing 81:10 channel 235:1 characterize 239:9 charge 83:19 charities 122:4 charleston 3:5 chart 80:2 82:12 110:18 charter 159:7 charts 82:20 137:14,24 146:17 check 249:10 270:20 cheri 142:18 143:4 174:24	chief 28:4,9 29:3 31:4,8,10,14,22,25 46:3,14,22 47:5 56:7 64:10 67:12 67:24 92:23 100:1 113:12,14 116:5 116:15 129:1 139:15 170:18 205:9 218:16 244:14 248:11,15 248:21 263:19 chief's 248:11 chiefs 75:21 227:13 children 28:15 29:16,19 35:11,13 35:14,15,17,21,24 36:3,6,9 37:1 59:20 60:17 68:17 75:19 china 93:19 choice 147:8 chosen 64:20 christina 208:23 209:18,21 210:4 213:9 chronic 187:8 church 226:21,24 circle 253:12 circumstances 15:25 31:7,9 cities 225:20 citizens 220:15 229:20 city 3:10 16:3 37:9 38:15 39:1,20 40:15,16 54:11 75:18 134:13 135:4 171:14 225:18 226:21,23 226:25 230:7,19	233:5 civil 272:3,7 276:5 277:5 claims 123:20 236:2 clarify 54:7 98:6 101:9 235:20 clarity 265:10 classified 251:4 clean 125:5 239:2 268:25 clear 17:6 153:24 228:16,18 240:24 259:22 cleveland 1:23 2:15 6:17 14:5 16:10 26:11,15 30:12,18 31:21 37:9 38:2 40:9,14 54:10,11,15 75:18 76:7 134:13 135:4 223:11,20 224:1 224:15 225:19 231:1,6,21 232:1 232:23 274:7 275:2 client 212:22 214:2 clientele 96:8 clients 231:23 clinic 6:17 76:7 223:11,21 224:1,5 224:15 231:1,7,21 232:2 clinical 173:4,10 193:21,24 205:9 253:21 clinician 193:12 193:14 195:18 clock 119:5,8,10	close 159:8 closer 61:24 coalition 5:25 166:18 cocaine 21:8 65:2 95:20 96:10 97:24 98:15 227:21 228:4,9 230:18 246:4 250:1,8,17 251:14,22 colleague 14:12 colleagues 192:2 200:16,24 201:8 206:12,23 269:9 collected 96:23 134:16 collection 73:16 college 26:11,16 collegial 109:13 columbus 85:2 142:4 combination 23:10 come 19:12 21:19 36:23 77:5 87:2 92:2 96:4,10,12,14 96:16,17 99:11 100:2 118:2 139:25 140:4 146:25 152:17 186:17 188:21 190:12 191:9 203:5,9 214:18 216:7 comes 40:5,6 112:23 114:7 118:12,14 152:13 153:25 188:21,25 203:18 227:7 coming 41:16 52:6 86:9 121:5 186:19
--	---	---	--

[coming - consumer]

Page 11

229:17 256:25 258:5 commenced 137:15 138:1 comment 72:12 110:5 comments 109:17 236:23 commission 258:24 259:4,17 259:23 274:17 276:19 277:25 278:25 commissioned 273:8 commissioner 37:16,17 commissions 259:1,9,18 committee 6:13 40:22 41:14,23 55:13 75:7 141:24 142:25 144:19,24 146:24 175:16 182:16 183:1,25 184:18,22 185:21 194:5,6 200:18 208:13 common 86:1 88:1 88:16,18,20 98:19 98:24 99:3,21 127:17,24 128:9 128:20 commonality 100:3 commonly 62:16 communicate 222:24 259:15 communicated 82:8 183:8	communication 76:23 communications 63:1 73:25 168:6 226:17,17 communities 75:22 226:23 262:3 community 20:14 26:11 36:20 38:10 38:18 46:19 47:1 47:9 48:7 50:5 51:20 60:22 61:13 63:2 87:3 103:16 105:24 109:3,18 110:7 116:18 141:12 144:11,14 151:18 152:13 163:9 166:10 171:24 180:7 188:4,22 189:4,23 190:22 192:22 195:5 196:17 197:21 200:1 205:24 206:9 210:19 211:12 226:2,10 227:19 230:22 233:15 238:6 239:7,12,23 260:7 companies 3:14 16:4 258:16 267:5 company 3:19 14:23 compared 45:15 45:25 80:12 82:14 120:12 222:21 226:10 227:4 228:12 230:2 compares 79:8	complain 216:22 217:1 complaint 25:19 266:5 complaints 216:7 216:9,18,20 completed 26:19 59:21 273:22 275:15 completely 16:25 18:22 compliance 219:3 concept 259:24 concern 38:10,21 188:17 190:11 concerned 154:22 188:8,14 concerns 177:4 190:10 200:20 concluded 200:18 271:10 conclusions 253:5 concurrence 50:22 condition 154:18 261:5 conduct 175:17 269:23 conducted 204:20 conducting 184:9 conduit 41:5 conference 182:17 confidential 5:3,6 5:9,12,16,19,23 6:2,5,8,11,16,19 6:23 7:1 27:4 54:24 108:4 131:6 142:9 160:23 166:15 174:15 177:13 181:25 208:9 223:10 234:11 242:16	247:3 confirm 143:12 conflict 34:3 congratulations 54:18,21 congresswoman 37:18 connected 228:16 connection 21:15 25:15,20 29:21 77:12 87:9 117:7 120:7 133:14 139:10 141:2 158:4,6 186:11 187:5 206:7 209:1 210:10 217:24 220:11 257:3,23 259:23 266:6 connolly 2:8 14:11 consensus 189:3 consequences 36:6 64:5 145:10 consider 260:24 261:4 considered 22:4 215:2 considering 70:8 71:2 consistency 215:7 218:1,2 consistent 190:6 211:17 214:25 consolidate 181:10 consolidated 61:6 consult 173:8 consultants 173:12 consulted 25:25 209:25 consumer 204:10 204:14,19 253:23
--	--	---	---

consumers 57:8 content 55:25 context 64:22 254:25 255:3 262:21,22 continuation 260:19 continue 57:10,13 97:15 156:20 continued 3:1 166:4 246:10,12 continuing 254:11 continuity 31:12 contract 16:5 112:1 contracts 111:17 112:2 151:5 contribute 264:6 contributed 94:20 157:5,11 190:19 191:16 194:19,23 195:4 197:8,19,20 201:23 237:24 238:5 239:6,11 254:8 262:18 263:2,14,21 contributes 151:25 contributing 46:7 46:17 90:16,22 156:11 191:22,25 192:3,21 193:2,3 194:16 197:5,16 198:3,4 200:6,12 200:15,19 201:8 201:15 253:5,13 254:2,11 contribution 35:23 contributor 36:8	contributors 239:21 control 84:5 controlled 257:4 257:24 258:13 conversations 52:23 53:6 63:5,7 83:14 convey 81:1 82:7 convince 221:9 convinced 189:23 190:22 convinces 260:21 conwell 51:24 52:5 143:16,18,25 222:8,9,10,11 conwell's 143:14 cope 156:25 copied 142:19 copies 178:25 copy 27:10,11 corner 78:25 85:11 110:10 155:5 262:14 corporation 3:2,8 33:11 correct 19:2 20:8 21:18 30:5,13,14 31:6 32:9 33:3 37:10 45:2 57:1 58:12 60:24 61:15 61:19 67:16 74:21 74:22 78:8,12,14 91:20 92:6,14 94:5 98:4 100:11 105:6,15 107:21 107:22 111:4 115:2 119:18 126:10 128:21 129:4 132:18 135:3,9,10 141:12	155:9 158:14,15 168:22 172:15 175:9 180:8,13,22 181:18,19 184:23 185:25 192:8 213:4 214:6 225:14 226:6 230:5 233:15 235:22 255:23,25 260:1 265:13 266:7,8 273:17 corrected 140:17 correction 61:8,9 correctional 60:23 61:12 corrections 275:12 277:17 correctly 35:16 41:7 48:2 58:3,17 67:11 114:13 151:11 162:19 172:4,9 180:3 217:21 231:16 corrects 219:9 correspondence 168:13 cost 60:3,4 120:25 costing 60:11 council 50:21 51:5 51:10,11,13,17 52:3 53:8,15 55:13 56:3,9,16 59:10 63:22 69:11 69:22 80:9 81:1 82:7 84:21 85:22 88:11 97:22 102:21 103:11,13 104:2,20 105:3,22 106:25 107:5,16 132:14 133:6,25 143:22 149:14	158:25 159:2,14 159:17 160:15 165:18,22 219:19 219:25 220:11,23 221:2,7,16,21 council's 75:7 councilman 70:4 70:11,13,23 71:5,7 71:9,14,17 75:4 150:11 counsel 2:7 3:3,8 14:6 41:17 149:24 150:6 272:1,10 274:2 counseling 57:17 57:18 counselors 60:19 counterpart 243:6 counties 22:3 41:3 41:10 80:13 82:14 82:19 83:7 84:18 country 91:20,23 96:19 146:11 152:22 189:23 190:21 225:20,25 256:25 258:5 county 1:13 2:2 5:7,24 14:9 19:10 19:17 20:6,17,19 22:9,22 23:13 27:14 28:11,13,14 28:25 29:4,15,19 35:10,20 36:2,14 36:25 37:16,17 40:21 41:1,8,24 42:6,8,18 43:23,23 44:16,24 45:4,5,10 45:12,19 46:3,8,14 46:22 47:5,7,16,17 48:4,4,19,20,25 49:1,6 50:2,13,18
---	--	--	--

[county - cuyahoga]

Page 13

50:21,23,25 51:1,4 51:14,17 52:13,18 53:7,15 54:25 55:11,13 56:2,9,15 56:22 59:10,25 63:3,22,23 65:21 66:17,18 67:7,14 68:16,18,20 69:11 69:21,25 70:16 71:13 73:9,14,17 73:20 74:2,6,9,13 74:20,25 75:16,17 76:1,4,13,18 78:6 78:11 79:10,10,15 79:18,21 80:9,10 80:12 81:1,19,22 82:1,7,8,14,16 83:19,23 84:21 85:21 87:10,17,20 88:11,21 89:5 90:14,21 92:20 93:2,12,18 94:12 94:21 95:19 96:11 97:22 99:23 101:5 101:19 102:7,12 102:21 103:10,12 103:13 104:2,2,19 105:3,21,22 106:25 107:1,5,16 107:16 109:11,20 110:25 112:6,11 112:18,23 125:8 127:20,25 128:21 132:13,14,14,17 133:6,24 134:13 135:1 140:21,25 141:5 143:22 145:11 149:2,5,14 150:13 151:16 154:18,21 155:24 156:12 157:6,12	157:18 158:16,25 159:14 160:8,11 160:15,15 161:19 162:11 163:7,15 163:16,17,20,25 164:21,24 165:1,2 165:16,17,18,19 165:20,21 166:7 166:18 167:14 170:20,25 171:2 171:13,14,15 172:1,15,21,23 173:16 175:12 176:14 178:17 181:16,17 183:17 184:7,10 187:16 187:22 190:10 191:19 193:15 194:17 195:1,20 196:11 197:5,17 198:11 199:7 200:20 201:10,16 201:25 204:7 205:3,18,25 206:9 209:8 210:1,5,11 213:3 214:6,14 216:4 217:1 218:18 219:19,25 220:11,23 221:1,5 221:7,11,15,21,23 221:25 222:20,21 222:23,24 225:24 226:12 227:3 228:12,20 229:17 230:6,17 232:22 233:5,8 234:1,6 237:19,25 238:4 239:5,21 240:2,9 240:15 241:11,19 241:25 242:1,5 244:15,24 245:5,9	245:15,21 246:11 248:6,22 250:15 251:12 254:9,12 260:5 262:19 263:18,20,23 266:6 267:7 268:4 269:25 273:4 276:10 277:15 county's 79:12 165:8 227:5 228:8 249:15 couple 55:23 103:20,24 105:8 105:14 129:15 224:17 241:22 269:15 course 26:22 61:21 163:16 246:21 courses 26:15 court 1:1 4:14 17:7,11 31:2 219:12 276:7 cov.com 3:12 cover 248:23 249:3 covered 138:14 164:17 covington 3:9 14:25 crack 37:6 65:2 66:1 95:8,13,20 96:9 97:11,23 98:14,15 227:6,11 227:21 228:3,9 230:6,10,18 250:3 cramp 145:3 crashes 65:17,17 65:23 create 219:17 221:6	created 220:10 creates 229:25 creating 180:16 219:23 creation 221:14 crime 227:20,22 criminal 227:22 264:17 265:11,12 criminals 229:16 crisis 90:7,8,23 146:23 198:24,25 199:9,14,14,17 cudell 32:24,25 33:1,1,8,15,22 34:6,11,15 cultural 263:1,12 cures 135:8 136:6 140:6,13 current 179:6 currently 28:3,8 134:19 curriculum 27:16 custody 4:13 cut 144:11,14 206:19 213:21 229:19 250:24 cutting 56:20 cuyah 5:5,8,11,15 5:18,22 6:1,4,7,10 6:14,18,21,25 7:3 7:6 27:7 55:2 108:7 131:9 142:13 161:2 166:19 174:18 177:16 182:3 208:15 223:13 234:14 242:19 247:6 252:9 cuyahoga 1:13 2:2 5:24 14:9 19:16 20:6,17 22:22
---	---	--	--

[cuyahoga - defendants]

Page 14

23:13 26:10 28:11 28:13,14,25 29:4 29:15,19 35:10 36:2,25 42:6 46:3 46:14,22 47:5,16 48:3,19,25 51:17 56:22 63:23 65:21 66:18,25 67:7 68:15 69:24 70:15 73:9,14,20 74:2,6 74:9,13,20,25 75:15 76:4,12,18 79:7,15,20 80:9,10 80:20,22 81:22 82:8,14 83:5,18,23 87:9,10,17,20 88:21 89:4 92:19 93:1,18 94:11,21 95:19 101:5,19 102:7,12 109:11 109:19 112:11 125:8 127:20,25 128:21 132:13 145:11 154:18,21 155:24 156:12 157:6,11,18 158:16 160:7 161:19 163:7,16 163:19,25 166:17 170:20 171:2,12 172:1,15,21,23 176:14 181:15 183:17 184:7 187:16,22,23 190:10 191:19 193:15 194:17,25 196:11 197:4,17 198:11 199:7 200:20 201:10,16 201:24 204:7 205:3,18,24 206:9	210:1 213:2 214:6 216:4 218:17 219:25 220:11 221:5,7,10,15,21 221:22,24 222:20 222:22,24 225:24 227:3 229:17 230:5,17 232:22 233:8,25 234:6 237:19,25 238:4 239:5,20 240:2,9 240:15 241:11,19 241:25 242:1,5 244:15,24 245:5 245:15,21 246:10 249:15 250:15 254:9,12 260:5 262:19 263:18,20 263:23 267:6 269:25 273:4 cycles 233:15 d d 33:2,4 d.c. 2:20 daily 118:16 119:4 dale 51:14 222:13 dan 1:10 37:17 51:13 159:3 222:12 darn 148:20 data 123:20 213:17 243:12 244:2,20 245:8,22 250:23 database 123:20 212:13 213:3 214:4,15 date 14:2 74:15 108:19 142:6 152:18 181:2 212:17 242:13	272:11 275:8 276:3,9,19 277:3 277:13,25 278:20 278:25 dates 244:17,18 david 243:2,3,5 dawn 106:13,15 115:10,11,14 124:5,7,12,17 180:1 day 2:18 14:17 24:10,12 26:22 118:20 184:12 190:13 270:9,9 274:7 276:16 277:22 278:22 days 275:18 dc 2:10 3:11 dcfs 59:16 dea 256:23 deal 33:11,12 38:5 68:20 76:25 77:4 77:6 87:14 89:12 89:21 107:6 120:25 121:1,4 123:7 195:25 220:17 236:10 dealers 87:21 94:25 95:7,12,19 96:8 97:10,22 225:17 229:12 238:4,16 239:5,11 239:14,20 250:8 250:12,17 dealing 34:20,24 35:13 77:1,2 dear 275:10 death 67:7 69:8 77:22 254:12 deaths 65:18,23 67:14,15,18,22,23	86:2 88:2,16,18,21 99:23 153:4 244:4 249:23 251:4 decades 233:10,25 234:5 december 108:19 118:5 deception 264:24 265:1,4,6 decide 137:19 decided 18:6 33:25 38:1 decides 86:24 decision 23:7 25:23 165:13 198:6 203:14 decisionmaking 59:16,23 60:3 decisions 51:6 52:21 147:11 202:12 deck 109:5 110:8 decline 244:18 declined 162:18 162:24 declining 163:21 164:1 244:11 decrease 166:3 decreased 164:21 decreasing 162:2 162:2,5,8,10,10,14 deed 276:14 277:20 deemed 275:19 defend 56:17 defendant 3:7 268:5 defendants 2:8 3:3 3:8 15:3,16 251:13,19 266:9 266:14,18,18
--	---	---	--

[defendants - differently]

Page 15

267:25 269:14,24 270:4,14 definite 62:22 degree 54:9,13,14 degrees 26:20 delivery 267:1 272:9,11 delos 208:23 209:18,21 210:4,8 213:9 217:6,23 219:8 demands 196:1 demerol 179:20 democrat 83:18 83:22 159:22 democratic 83:23 83:24 84:7 democrats 71:12 demonstrate 56:19 80:3 demonstrating 52:6 demonstrative 94:2 demoted 31:16 denied 150:23 denihan 1:19 4:7 6:17 15:4,9,11 24:1 54:3 55:15 70:6 73:8 75:5 83:18 108:13 147:6 161:8 166:25 167:24 172:2 174:12 182:23 198:20 208:18 223:12,18 235:17,25 236:16 252:14 266:1 269:10,12 270:18 273:9 275:8 276:4 276:9 277:4,13	278:20 denihan's 5:4,17 27:5 142:11 deny 63:6 168:10 department 28:15 29:16,19 30:21,22 35:11,20 36:9 37:1 44:10,13 59:20 60:17 68:17 74:23 75:18 106:16 167:12 168:7,15 169:7,23 170:7 171:14,15 171:20 172:12 275:22 departments 59:24 165:1 dependency 157:2 depleted 139:4 deployment 38:17 deposed 15:7,19 15:23 deposition 1:18 14:5 16:8,14,18 19:4,15 24:2,14,21 26:24 27:3 54:23 55:7 108:3,17 131:5 142:8 160:22 166:14 174:14 177:12,22 181:24 208:8 223:9 234:10 242:15,25 245:24 247:2 252:5 271:10 273:20 275:8,11 276:1,3 277:1,3 depositions 16:1 25:14 depression 156:21	derivative 250:3 describe 15:25 20:12 42:24 43:1 45:17 64:19 83:13 111:12 179:12 192:3 described 90:18 99:9 102:24 180:21 195:22 describes 169:9 description 5:2 designated 5:3,6,9 5:12,16,19,23 6:2 6:5,8,11,16,19,23 7:1 27:4 54:24 108:4 112:12,19 131:6 142:9 157:19 158:17 159:15 160:13,23 166:15 174:15 177:13 181:25 208:9 223:10 234:11 236:3 242:16 247:3 designed 80:3 235:21 desktop 248:11 destruction 35:23 details 42:22 140:9 216:2 determination 261:11,19,24 determine 111:18 112:15 121:17,19 126:20 202:19 214:4 determined 52:17 66:17 determining 160:12 258:13	detox 115:21 detoxification 120:16,19,24 121:11,18 122:6 126:18 devastating 155:13 developed 100:20 101:13 115:22 240:8 development 33:10 117:2 diagnosis 61:4,25 62:1 193:21,24 261:6 dialogue 73:24 die 153:25 died 94:16 130:4 250:16,23 251:14 251:21,25 dies 251:7 difference 64:25 86:4 152:24 153:1 153:3 160:2 217:10 227:18 238:12,12 differences 227:2 228:19,20 different 23:19 36:5 37:5 42:11 56:24 75:22 90:2 92:5 95:22 111:16 125:14 140:1 148:19 152:21 176:5 196:3 218:3 227:16 228:10 229:8 238:18 244:25 245:6,15 245:18,20 differently 112:9
--	---	---	--

[difficult - dozen]

Page 16

difficult 71:21 72:3,13,13 dignity 38:7 direct 28:1 55:22 78:15 80:14 94:23 165:15 179:4 184:24 185:18 204:10,14,19 209:13 230:24 237:12 249:12 253:23 directed 46:5,16 46:24 59:6 116:6 116:16 236:22 direction 86:13 directly 43:3,5,25 44:1 45:9 48:16 111:21 112:23 117:6 169:2 director 16:10 28:14 29:15,18,25 30:3,12,18,19 31:15,20 35:10 36:2,25 54:11 68:16 75:17 119:6 143:5 225:19 directors 23:11 disagree 50:24 138:23 199:2 200:19 disappointment 149:9 discretion 111:8 111:14 140:15,16 discretionary 107:4 112:23 114:12,15,21 118:8,8,12 discussed 124:21 125:9 131:20 210:3	discussing 28:19 28:24 discussion 160:9 183:14 discussions 184:3 210:6 disease 49:16 87:14 147:9,17 227:24 diseases 66:1 147:10,17 disorder 62:6,10 62:11,17,18 63:2 98:20 99:4 100:4 121:12 127:17 128:9,20 240:9 disorders 20:25 21:17 49:12 63:12 84:10,14 121:13 124:1,2 152:14 153:15,16 156:2 disparity 82:18 dispense 268:8 269:3 dispensed 268:20 disproportional 144:14 disproportionally 230:21 disproportionately 226:1 dispute 16:5 dissolve 22:10 distinct 238:18 distinguished 54:21 distribute 20:19 43:4,23 distribution 29:8 29:13 42:18 195:19 237:20	distributor 2:7 3:2 3:3,7,8 267:5 distributors 266:23 267:1 district 1:2 diversion 254:21 254:25 255:2 264:15 265:12 diverted 256:14 division 1:3 divisions 30:21 doc 99:15 doctor 62:23 101:6 187:20 190:12 193:12,14 195:17 196:8 209:22 212:16,25 256:2,4,8 260:19 269:5 doctor's 262:7 doctorate 54:13 54:14 doctors 173:7 187:8 190:2 210:15,21,22,25 211:3,12 212:5,6 213:9,24 214:6 215:14,22 217:1 218:13,19 224:6,7 231:23 232:12 256:5 258:6 261:9 261:17,23 document 1:12 5:13 27:13 55:6 55:14 68:3 74:17 108:16,22 131:7 131:16,20,25 132:5,7,19 134:18 136:15 137:19 138:24 142:16 149:12,22 150:6	161:11 162:8,14 168:2 169:23 170:7 175:5 176:18 177:9,20 178:13 179:11 180:21 182:7,13 182:20 184:25 189:15,20,21 207:20 208:5,18 209:15,17 213:24 223:17,18 234:17 234:19 242:23 243:20 247:10 248:3,10,22,23 249:2,2,9 252:13 documents 24:20 24:23,25 25:1,4,6 25:10 26:9,23 27:20 78:17 186:15,23 dog 30:23 dogs 34:8 doing 53:19 55:9 60:4 89:23 150:12 173:9 194:9 197:24 232:18 dollar 79:25 dollars 44:16,17 44:17 115:15 118:8,9 126:20 127:4,4 doses 202:8 double 125:19 doubled 149:4 downturn 154:10 157:10 downward 241:10 241:19,25 242:5 242:10 246:23 dozen 15:24
--	--	---	--

[dr - enforcement]

Page 17

dr 208:23 209:18 209:21 210:3,8 217:6,23 219:8 236:16 draft 131:22 drain 222:7 drawn 109:23 140:22 driving 65:17 152:25 153:1,4 drug 3:2 6:13 7:4 20:16 22:1 28:9 32:7,11,19,20 36:11 57:18 86:1 86:2,19,23,25 87:16,20 88:1,1,16 88:16,18,20,21 91:4,12 92:19 94:11 95:12,18 96:7 97:10,14,22 143:8 162:16,22 169:10 170:1,13 173:20,24 176:21 179:23 180:11 181:11 182:15 184:17 193:5 200:17 204:16 205:6 208:12 210:15 211:1 227:5 228:2 237:14,19,24,25 238:4,14,16 239:5 239:10,11,19,20 241:18 242:4,9 243:12 244:2 245:8,22 248:8 250:7,8,12,12 252:6,16,20 253:4 256:20 257:2,22 258:12 262:12 263:25 266:23	267:1,4 268:20 drugs 34:9,16,19 35:19,22 37:4 93:18 95:8 156:22 156:24 167:13 168:22 233:14 244:4 256:24 258:5,6 260:11,13 260:14 270:13 drunk 65:17 152:25 153:1,4 dual 61:3,25 62:1 due 40:5,6 170:23 249:25 dulaney 142:19 duly 15:6 273:7,10 duties 20:12 29:2 29:5 30:17 32:17 35:9 176:2 256:23 duty 261:4 dying 188:9 198:18 dynamic 249:19	east 3:5 159:23 eastern 1:3 easy 124:9 ebb 237:2 ebbed 233:9 economic 154:10 157:10 economy 155:14 155:21 edgewater 34:1,2 education 26:5 effect 72:22,24 73:2 237:16 effective 21:24 94:1 198:23 effectively 89:21 90:6 190:2 199:6 199:13 201:14,23 effectiveness 70:5 70:25 effort 152:23 159:9,11 160:6 171:25 190:2 efforts 158:21 161:13,18 222:22 227:5 254:17 eight 43:14 159:4 159:7 either 20:21 49:3 89:7 184:9 206:5 206:18,19 274:2 elect 148:13 175:7 175:15,20,24 176:4,7,9,12 election 37:13 elephant 94:3 ellis 2:14 14:14 email 5:3,6,13,16 5:20,23 6:2,5,8,11 6:16,20,23 7:1 27:4,14 54:25	55:10,20,21,25 56:21 64:14 70:3 78:17 131:1,7,14 131:16,24 136:1 142:10,17 143:12 160:24 161:12,25 166:16,25 167:5,9 169:3 174:16,23 175:3 177:14,24 178:10 182:1 184:14 208:10,19 209:15 217:7 219:7 223:11,19 234:12 242:17 243:1,10,12 247:4 247:11 248:9 275:17 emails 179:1 emergency 30:22 179:23 180:12 249:15 emotional 156:21 emphasis 228:10 employed 22:13 22:21 employees 173:13 enact 76:24 enacted 146:3 188:24 enclosed 275:11 endeavoring 168:16 ended 38:16 endo 3:13,13 15:2 ends 85:12 enforcement 96:5 96:11,15 227:19 228:11,17 229:2 256:20,24 257:2 257:22 258:5,12
	e 2:4,9 33:2,4 135:9 275:5 earlier 54:6 77:8 111:7 126:5 130:17 132:11 134:9 143:6,20 149:12 174:25 198:19,22 207:11 215:14 237:18 252:17 266:4 early 65:1 77:21 95:16 earmarked 112:12 112:17,24 140:13 140:18 easily 240:14		

[enhance - exist]

Page 18

enhance 138:12	264:7	88:22 120:8	40:22 41:14,23
enhanced 137:15	epidemics 226:11	exactly 32:3 39:25	46:3,14,22 47:5
138:1,14	227:6 228:3	50:6,7 65:13 73:4	56:7 64:10 67:12
ensure 35:14	epidemiological	78:3 81:3 84:8	67:25 68:16 92:24
151:10 195:9	181:13	119:3,16 130:19	100:1 103:13
219:3	equalizing 82:17	138:8 140:7	104:2 105:22
ensuring 164:23	equity 85:3	194:18 203:1	107:1,16 113:12
entered 277:9	era 65:3 67:4	examination 4:7	113:14 116:6,16
entire 40:5 133:11	227:21	15:5,9 269:10	119:6 129:2
144:12 209:15	eroding 40:8,9,10	examiner 73:11	132:15 139:15
276:5 277:5	40:16	74:19,24 75:14	143:5 160:11,15
entities 111:3	errata 275:13,18	88:4,8,15 94:15	165:19 170:19
entitled 108:18	277:7,10,18 278:1	171:15 251:9	175:16 177:14
178:15 179:6	escalation 179:18	examiner's 67:20	218:16 232:23
185:1 224:16	180:6 206:20	251:5	244:15 263:19
252:25	escapes 113:23	example 40:1,7	executive's 51:2
entity 19:11 28:23	220:20	65:2,22 72:1,9	248:6
32:24 33:12 34:7	especially 40:2	98:13 106:6,7	exhibit 4:13 5:3,6
76:20 77:5	60:7 155:13	116:2 117:8,9	5:9,12,16,19,23
epidemic 5:14	esq 2:4,9,9,14,19	118:11 212:9,12	6:2,5,8,11,16,19
47:12 49:17 63:18	3:4,9,16,20	220:18 221:3	6:23 7:1,4 26:25
63:25 64:16,18,20	established 34:12	222:7,11,12	27:3,11 54:23
66:3,16,19 68:8,9	74:13,16 78:7	228:10 233:4	55:7,7 63:16 68:5
69:13,24 77:12	173:20,25	255:19	74:18 79:6 108:3
85:23 89:15 115:7	et 1:13,14 66:2	examples 114:25	108:17 127:6
123:9 127:21	179:20	115:18 205:7	131:2,5,25 142:8
131:8,17,21	evaluate 204:1	exceeded 67:8	142:17 149:13,20
132:16 148:6	evaluation 204:3	exchange 115:24	150:6 160:22
150:9 151:17	evaluations 110:5	166:25 208:20,23	161:11 162:9
169:9,16,20,25	evelyn 222:8	exchanges 167:11	166:14,24 168:2
170:9,12 172:1,15	event 39:7 181:12	exclusively 120:25	174:14,21 176:18
180:16,22 181:4	274:3	excuse 21:24	177:12,21 181:24
181:14,17 193:6	eventually 138:16	22:10 30:7 104:11	182:8 208:8,19
194:17 195:5	200:3	143:7 146:5 159:1	223:9,18 234:10
197:17 201:9,16	everybody 37:20	excuses 150:16	234:18 242:15,24
206:13,24 210:5	148:15 150:18	executed 277:10	243:1 245:24
214:18,19 225:4	154:14 188:16	execution 276:14	247:2,11 252:5,14
228:9 230:6,11	218:8 225:8	277:19	exhibits 4:5,14 5:1
237:25 238:6	evidence 250:16	executive 6:6 28:4	26:23 149:20
239:7,12 252:25	exact 36:4 42:8	28:9,14 29:3,15,18	exist 33:16
253:11,14 260:6	47:21 49:24 74:15	35:10 36:2,25	

[existing - finally]

Page 19

existing 22:17 23:1 98:3,9 100:10,16 exists 152:12 153:14 expend 117:6 expended 139:13 expenditure 120:14 expenditures 46:5 46:16,24 48:16 110:11,14 111:19 112:13,20 114:10 114:16,21 115:5 116:4,14 121:18 122:6 124:19,24 125:7,13 126:4,10 126:21 127:7 130:21 141:2 expenses 57:8 59:12 experience 71:20 72:11 184:4 196:14 230:4 experiencing 66:18,23 172:23 expertise 52:20 153:9,10 173:14 181:9 expiration 276:19 277:25 278:25 expires 274:17 explain 76:15 80:2 153:13 165:10 explained 73:8 116:25 117:4 134:9 explains 231:2 235:1 explanation 162:9 197:2	exploded 65:10 explosive 77:3 expressing 150:7 extent 35:18 94:18 117:5,11 121:10 133:3 151:15 154:7 157:9 163:24 193:4 197:19 239:10 240:24 extremely 66:9 f f 2:17 face 225:3 facilities 61:12 facility 60:23 61:9 facing 175:18 fact 5:21 30:2 81:4 97:6 120:21 160:25 165:24 166:5 174:22 175:19 176:17 202:6 203:5 214:8 226:8 235:21 238:19 factor 35:19 156:11 191:22,25 192:21 193:2,3 197:19 200:15 201:15 254:2,11 factors 46:7,17 52:17 90:16,22 192:4 194:16,19 194:22 195:2,4 197:6,16,18 198:3 198:4 200:6,12,19 200:23 201:6,9 253:6,13 263:21 failed 216:5 219:2 fair 17:13,14 19:13 20:23 21:2	25:13 36:7 119:17 137:22 175:21 245:1 faith 138:15 false 206:4 familiar 20:10 42:22 49:11 86:22 268:3 families 36:19 153:6 family 28:15 29:16 29:20 35:11,21,23 36:3,9,10 37:1 59:21 60:18 68:17 75:19 99:16 127:10 255:20 far 28:19,24 53:20 66:22 102:13 136:7 236:20 fatalities 65:1 66:13 67:1,6 89:7 92:14 93:12 94:20 239:23 241:10,24 242:4,10 244:9 246:4,10 fatality 245:4 251:20 favor 159:15 favorable 246:16 246:19 fax 129:13 fda 86:23 91:14 92:9 192:13,23 193:1 fda's 192:19 february 178:1,21 180:5,13,20 181:1 181:15 274:8 275:4 federal 42:12 44:17 75:20	110:25 135:8,12 136:6 140:6,13 146:15 feds 136:11 fell 39:21 felons 229:13,20 felt 212:1 213:23 215:6 fentanyl 90:25 91:3,8,13,19 92:4 92:6,8,11,18 93:1 93:10,13,17 94:19 115:23 116:1 120:1,3,7 250:1,7 250:11,17,25 251:8,10,15,22 252:1 ferraro 1:22 fewer 49:18,18 field 19:8 181:20 188:7,14,16 fifth 189:24 190:23 191:16 207:14 229:14,15 259:5,24 figure 113:2 122:21 134:3 152:8 194:18 197:7 243:21 244:1 245:1,7,17 246:1 figures 65:1,12,14 67:19 79:25 fill 84:23 filled 256:6 final 7:5 94:24 95:6 132:12 160:14 174:1,4 232:21 252:7 finally 54:9 83:17
--	---	--	---

finance 51:11,14 130:14 141:24 142:24 144:19,24 financial 154:17 financing 111:20 233:4 find 69:5 89:20 91:9 99:12,15,15 124:9 211:8 212:24 214:1,9 227:15 231:4 251:11 275:11 finding 214:11 findings 243:13 244:2 245:8,23 fine 99:25 114:4 117:10 196:24 finish 69:15 104:24,25 116:9 144:20 145:5 213:20 finishing 209:11 fire 30:22 40:3 firefighters 39:6 39:13,24 40:13 first 15:6 16:22 26:25 32:1,2,23 48:24 56:1 57:2 64:24 77:9,11,14 85:25 102:8 106:18 112:6 137:13 141:14 146:19 158:11 161:25 167:18 169:5 170:17 175:6 184:5 185:20 196:1 201:17 209:17 210:13 214:14 229:9,11,11 238:14 249:13	253:9 259:16 273:10 fit 171:16 five 88:23,25 fka 3:14 flip 102:19 171:18 177:23 floodgates 187:8 187:13 floor 2:4 3:20 flow 237:2 flowed 233:9 fluctuate 44:22 fluctuations 150:15 focused 38:1 58:2 64:11 folks 69:10 72:10 188:7,13 195:9 206:21 follow 16:20 216:5 269:15 followed 231:8,22 232:2 following 72:7 212:5,7 215:15,22 218:9,13,20 follows 15:8 134:23 136:17 food 86:19 193:5 fora 141:11 force 7:5,5 73:10 73:15,18,21 74:2 74:10,13,21 75:1 75:16 76:5,13,19 77:5 78:7 87:11 89:9 90:14 92:25 102:12 172:22 173:21,24 176:21 187:24 193:16 195:1 196:11	198:12 221:6 252:7,7,16,20 253:4 262:12 263:19,25 forces 76:22 forecast 38:25 foregoing 273:16 273:21 276:13 277:18 forgotten 25:3 form 18:3,13 22:11 23:18 69:7 127:14 128:20 213:12 265:13 formal 171:19 format 224:23 formed 23:1,3,8 33:11 former 19:16 28:12 82:12 222:13 forms 20:24 21:1 91:13,18 forth 44:23 126:18 148:3 214:13 245:16 fortuitous 131:13 forward 6:5,8 85:19 177:14 182:1 275:15 forwarded 182:14 forwarding 177:25 foster 35:13 60:5 found 94:15,16 founder 32:23 74:4 founders 74:1 four 88:23,25 123:17 159:21 160:2	fourth 63:15 70:3 229:15 frank 130:13,21 232:24 franklin 2:19 14:16,16 79:17,21 243:6,7 frankly 123:15 152:19 213:15 fraudulent 205:22 free 276:14 277:20 frequency 100:3 frequently 190:13 front 125:21 161:10 177:20 208:5 frustration 146:8 full 99:10 134:16 function 217:17 fund 58:5,19 61:12 106:18 109:15 114:19 145:14,24 165:3 funded 80:20 106:15 115:12,14 120:3 133:12,14 134:4 165:2 funding 20:18,19 29:7,8,13 38:15,21 39:1,18,20,21 42:5 42:7,14,20,25 43:2 43:5,8 44:25 45:3 45:12,16,18 47:10 48:10 49:9,13 52:12 56:19,20,24 61:9 80:6 82:13 82:15,17 84:6,16 84:17 85:3 103:20 104:3,8,10 106:22 109:20 110:11,13 112:22 117:20,24
---	--	--	--

118:6 132:15 133:7,17 134:22 136:16 139:2 144:10 145:2,8 146:17 147:3,12 149:10 150:8,20 162:15,22 163:1,3 163:6,12,19,24 164:5,9,16,22,25 165:8,14 166:6 184:3 195:8,20 206:18,19 221:10 221:11 222:19,25 funds 39:20 42:11 44:18 45:8 47:7 47:18 48:5,20 49:1 50:13 52:15 52:18 68:7 103:14 105:23 107:1,4,17 110:24 111:1,1,6,9 112:7,7,10,18 114:12 115:12 117:1,6 123:22 124:6 134:6 139:9 139:11,13,25 140:2,2,25 141:5 151:12 162:2,3,5,8 162:10,11,14 further 164:20 230:25 273:19 274:1 future 38:16	gaps 84:23 general 26:4 41:5 44:3,9 49:23 83:15 86:6 96:17 141:19 153:19,19 162:15,21 165:2 183:1,14,15,25 185:22 188:15,18 194:4 207:22 221:22 222:25 243:13 244:2 245:8,23 263:2,13 generally 33:14 49:25 226:22 gentleman 113:23 genuine 52:7 getting 34:25 89:21 129:12 153:8,10 194:10 194:11,13 198:17 221:11 give 17:19 19:4,15 40:1 43:22 45:23 51:12 55:8 62:22 68:10 72:1 113:24 114:2 115:24 117:8 132:3 147:20 152:17 167:8 170:3 177:22 185:4 205:7 208:20 248:2 252:18 272:1,10 given 16:16 25:15 58:7 67:20 112:18 151:21 182:7 251:23 252:3 262:7 273:13,18 giving 24:2 27:11 115:17	glad 181:22 glading 201:18 go 16:19 18:8,13 31:1 43:3 47:17 53:4,21 60:19 61:14 66:4,5 67:2 72:5,7,8,18 83:10 99:24 107:5,23 110:9 111:21 113:1,5 115:19 118:2 121:23 122:1 150:14 160:16 163:14 170:17 174:5 179:16 197:23 198:20 207:3 213:20 215:9 219:7 228:7 231:15 235:5 237:6 243:25 246:10,12 249:9 255:20 265:19 goes 49:14 84:3 146:16 147:12 148:2 going 15:16 17:4 26:24 27:10 31:13 48:25 50:12 52:25 55:22 63:16 65:6 68:5 77:23 78:18 83:25 84:2 85:6,9 101:15 102:19 104:19 123:17,18 137:16,20 142:4 143:24 146:8 153:20 167:9 168:19,20 171:10 174:21 185:5 191:7 203:24 208:4 220:3,4 221:20 223:17	227:8 229:16 233:25 234:5,21 234:25 236:24 242:1 243:18 246:23,25 249:3 252:23 256:5 257:10 good 15:11,12 26:1 31:15 37:22 53:20 77:6 90:11 101:16 129:7 138:15 149:6 151:11 181:21 195:8 212:2 221:2 231:7 246:22,24 269:12 government 16:3 16:3 36:15 38:15 41:6 42:11,11,13 48:20 60:1 68:18 68:20 83:11,24 84:5 90:15 135:8 135:12 150:14 151:4 governor 32:6 173:19,25 governor's 176:21 grading 201:13,20 201:21 gradually 66:5 graduate 26:15,19 grant 3:21 granted 52:15 133:24 134:6 150:22 grants 40:3 42:12 111:2 graph 78:21 79:7 gratitude 232:22 great 54:17 130:16 148:23 149:8
g			
gained 214:15 gallagher 70:4,12 70:13,17,24 71:6 71:13,17 75:4 149:15,17,17,24 149:25 150:4,5,7 150:11 159:20			

154:11,17 155:8 155:19 156:1,10 157:4 161:22 greater 146:21 greenspan 70:14 70:17,19,20 159:19 ground 16:19 17:16 group 177:24 growing 253:22 guess 63:8 77:20 91:5 133:22 guessing 133:21 guidelines 186:11 187:1,12 188:1 189:9 191:3 207:14,19,25 208:25 215:16,23 216:5 217:25 218:13,18,20 219:4 220:12	happened 39:3 40:17 104:13,13 136:4 137:7 138:20 153:10 165:11 188:7 227:17 228:1 230:1 happening 89:13 158:23 165:24 198:25 210:18 happens 150:17 205:8 207:5 happy 85:13,17 165:11,23 166:1 hard 81:9 108:15 134:3 147:15 152:2 178:25 harm 35:24 269:24 harper 129:24,25 131:15 hawkins 2:9 14:12 hbc 3:19 14:23 he'll 220:7 head 17:20,20,24 20:6 health 2:7 3:13 5:10,20 14:11 20:16 21:17,22,25 22:5,8,20,22 28:10 28:13 29:21 40:21 41:1,8,24 44:11,13 45:15 57:22,25 59:8 60:1,7,8,10 60:22 62:11,17 63:2,12 75:17,18 90:6,23 106:16 108:5,24 109:1,6 109:12,16,21,25 110:3,6 114:22 127:10 143:8	144:11 145:8,14 145:25 146:10,11 146:12,18,22 147:7 149:9 154:23 155:12,15 160:24 162:17,23 163:20,25 165:3 167:12 168:7,16 169:7,23 170:8 171:14,15,20 172:12 175:13 178:18 181:10 198:24 267:10,13 healthcare 182:16 184:18 203:19 204:6 205:2,17 216:3 267:2 hear 130:5 181:22 220:14 239:17 heard 90:25 92:22 93:13,16,22 186:5 221:12 228:19 230:13 238:11 254:20,22 256:1 256:19 258:8,19 258:23,25,25 259:3,20,22 260:2 266:11,22 267:9 267:15,17,21 hearing 184:9 hearings 60:19 heart 91:5,6 189:25 heavily 83:24 heights 159:25 held 19:7 29:20 help 33:12 81:6 84:22 85:13 99:19 99:20 102:17 134:17 162:4 199:16 204:16	helpful 134:21 212:20 helps 17:6 henschel 3:24 hereinafter 15:7 hereunto 274:5 heroin 6:20 21:10 37:6 63:18,25 64:15 65:4 66:2 66:19 67:1 68:7,9 68:19 69:7,13,24 85:22 86:1,5,7 87:2,15,25 88:15 88:19 95:3,9,13,20 96:10 97:12,24 98:2,8,16 100:21 214:18 233:7,19 233:25 234:5,12 237:2,14 240:4,13 240:19,25 241:3 hesitation 259:8 hhh 45:18 hhs 45:6,11 115:12 120:4 160:6 164:24 165:8 high 34:18 227:9 higher 190:17 202:6,7 highest 65:6 82:2 highland 159:25 highlighting 209:4 209:7 highway 29:25 30:3 75:22 hire 23:7 history 26:5 202:25 250:18,25 261:5 hit 127:22 hocking 80:21
h			
habits 262:13,17 half 133:17,20 153:4 229:19 249:18 halfway 134:19 144:9 209:17 hall 226:24 hamilton 245:9 hand 27:10 79:23 85:11 110:10 155:4 239:14 262:14 263:6 274:6 handed 108:16 happen 39:20 66:8 100:12 137:8,10 159:10 222:2 232:24			

[hold - indicate]

Page 23

hold 196:19,19 213:18,18 holdings 3:15 home 236:18 homeless 57:11 homeowners 34:2 homes 34:21 156:20 157:16 homicides 65:18 65:22 honest 156:18 honorary 54:13 honored 50:14 52:14 hope 84:25 93:8 186:21 236:18 hopes 84:21 hospital 43:9 49:15,15 190:14 191:8 201:13 214:11 hospitals 75:24,25 76:9 147:2 201:22 211:19 215:1,3,15 215:21 216:4 217:1,12,16,25 218:12,17 219:2 219:17 220:13 258:7 hours 119:10,11 119:11 house 184:16 housing 57:13 houston 3:16 15:1 15:1 hovered 65:23 77:24 huge 99:22 huh 16:15 28:6,17 37:11 53:18 58:9 76:2 80:24 95:5	95:10 103:6 126:11 130:9,23 132:2 134:25 138:2 139:5 143:1 169:12 179:10 180:23 185:17 210:17 211:20 215:17 217:20 225:6 231:17 234:24 237:11,22 238:22 244:7 human 45:15 114:22 163:20,25 165:3 humans 94:5 hundred 62:21 hundreds 178:25 178:25 hurd 37:19 hydrocodone 192:15	identify 14:6 112:17 115:3,23 125:6 127:3 137:14,25 236:7 identifying 119:16 iii 185:1,10,16 189:20 illegal 86:8 87:3 91:19 92:5,8,11 94:7 203:25 204:5 256:24 illegally 91:19 92:18 93:2,10,14 93:18 94:10 101:6 101:21 102:9 illegitimate 204:4 illegitimately 203:21 illicit 94:19 240:4 illness 20:21 29:9 49:16 57:17 61:4 61:17 62:3 66:1 203:1 227:24 illnesses 195:21 imagine 155:22 impact 36:19 42:15,20,23 94:2 116:23,24 155:14 156:1 163:7 166:8 219:16 223:1 226:11 impacted 154:17 154:20 164:15,19 187:15 188:2 impacting 230:22 imperative 199:8 199:12,23 impinge 18:25 implicated 179:22 180:11	importance 115:9 important 16:22 17:4,22 89:14 90:7 198:24 229:22 imported 91:20,23 improvement 32:24 33:2,8,15,22 34:6,11,15 inadequate 84:17 145:7 incarceration 147:22,23 229:19 inclined 192:24,25 193:1 include 21:3,5 54:8 included 163:13 166:12 275:13 includes 195:22 including 84:9 152:14 183:2 257:4,24 258:14 inconsistent 211:23,25 212:1 incorporated 32:24 33:2,9,16,23 34:7,12,15 277:12 incorrect 97:12,13 97:24 increase 64:4 65:9 92:14 99:22 104:7 120:22 123:8 166:4 increased 191:9 increases 165:1 increasing 95:3 164:6,10 index 4:1,5 5:1 8:1 indicate 55:10 139:23 210:8
	i		
	idea 17:3 26:1 152:10 153:20 189:6 197:25 identification 27:8 55:4 108:8 131:11 142:14 161:3 166:21 174:19 177:18 182:5 208:16 223:15 234:15 242:21 247:8 252:11 identified 19:20 106:11 117:16 126:5 200:13,23 201:6 229:5 235:17 236:1,6 263:23 identifies 126:8		

[indicate - jonesday.com]

Page 24

214:24 indicated 21:14 44:24 45:21 52:11 68:25 77:8 105:7 111:7 114:9,20 120:14 150:19 207:11 215:14 236:17 266:4 indicates 31:3 32:5,22 37:8 74:18 97:9 109:5 110:24 135:1 136:21 142:22 143:12 164:22 176:23 189:20 248:20 indicating 172:12 275:13 indication 175:6 individual 123:16 130:18 211:9 214:10 251:6,21 251:24 256:16 261:1,5,24 individualized 261:11,19 individuals 20:20 30:25 51:9,22 61:15 62:9,18 63:1,10 73:16 95:13 98:1,8,14,20 100:3,8,14,19 101:3,11,12,18 102:7 113:19 124:1 166:3 167:11 175:4 179:18 180:6 195:20 216:8,9,12 216:25 229:4 240:2,8,24 250:16 250:23 251:13	260:13 influence 85:1 influential 171:24 influx 121:4 inform 41:16 information 19:21 19:25 41:6 81:2 84:21 88:7,14 95:24 96:3,7,23 97:8 102:1 138:23 177:25 182:15 214:1 217:5 235:19 239:15 250:22 251:11 254:16 initiated 240:3,9 initiative 5:24 139:2 166:17 initiatives 134:20 139:10 168:17 inner 225:18 226:21,25 230:7 230:19 input 131:22 ins 34:9 insofar 200:20 instance 169:1,19 instances 52:12,14 103:11 104:1 105:20 106:10,24 107:15 150:21,23 216:3 institution 229:16 instruction 272:2 272:10 intended 128:17 interactions 204:25 205:15 interchangeably 241:1	interest 51:18 52:7 52:8,10 interested 274:3 internet 103:5 264:15 interpret 83:21 interview 6:21 234:13 intractable 185:24 186:2 188:19 207:24 introduced 15:13 92:12,19 93:1,11 93:17 94:11 investigate 89:10 173:14 invincible 154:2 invitation 171:19 involve 20:24 involved 36:14 51:5 68:15 75:15 122:6 147:14 148:16 179:25 225:9 involvement 25:22 172:21 issue 18:15 82:15 141:6,11 151:23 152:25 170:21 197:4 issued 173:25 252:20 issues 37:25 38:3,6 38:9,11 41:15 64:12 96:13 141:20,24 175:17 176:13 223:1 item 57:2 59:15 60:20 63:15 68:5 113:5 117:17 204:9	items 253:25 j jackson 3:4 14:20 232:24 jacksonkelly.com 3:6 jail 147:22 janderson 3:6 jane 37:14,16 janssen 2:13 14:15 269:14 january 1:20 14:2 178:16 jargon 68:12 jennifer 2:14 14:13 167:2 269:13 jennifer.steinmetz 2:16 job 25:8 34:25 53:20 90:12,13 119:12 146:8 148:23 151:9,10 152:7,9 195:6,7,10 196:1 jobs 156:20 157:16 229:21,25 john 3:9 14:24 37:18 270:25 johnson 2:13,13 14:14,15 269:14 269:14 joined 14:12 joint 258:23 259:1 259:3,9,16,17,23 jon 3:4 14:19 270:23 jones 2:18 14:17 jonesday.com 2:21
--	---	---	--

laying 40:12	level 80:20 84:16	lines 80:19 243:19	longer 23:20 43:4
leader 171:24	89:6 115:8 145:16	list 37:22 57:2	49:19,19 58:6,21
leadership 170:18	146:1,3,4 189:25	59:15 63:15 204:9	190:17
170:24 187:21	190:15 219:24	listed 81:23	longtime 196:9
leading 67:6	221:15 241:17	238:19 253:25	look 27:23 55:8
leads 157:2	242:3	277:7,17	71:10 78:25 80:16
learned 91:10	levels 46:25 156:1	listing 277:7	85:10 97:3 112:6
147:19	156:12 157:5	literally 178:25	125:24 132:4
leave 113:24 114:3	172:24 188:3	literature 117:3	134:18 136:14
led 28:20	191:17 207:7	litigation 1:7 14:4	137:18 144:2
lee 3:5	227:3	26:10 27:14 275:6	167:8,16 170:16
left 113:25 134:14	levies 110:25	276:3 277:3	175:5 176:17
149:3 243:19	levy 5:21 45:6,11	little 28:7 38:23	184:13 185:4
266:3	45:18 114:23	42:24 59:3 90:2	186:23 194:1
leg 145:3	115:12 120:4	111:13 112:4	208:21 209:9
legal 86:8 92:4	157:19 158:2,12	134:17 139:24	221:23 224:23
255:23 275:1	158:18 159:15	174:25 179:21	237:4 243:16,18
278:1	160:7,13,25	188:11 222:15	243:24 244:20
legally 91:4,11	161:13,19 163:20	230:25 252:17	248:3,9 269:8
legislation 44:3	163:25 164:24	262:14	looked 25:10
185:23 187:6	165:4,8	live 179:2	41:11 100:25
188:24	lexington 2:4	lives 76:14,19	102:13 146:16
legislative 6:13	liaison 2:7 3:3,8	living 57:9 145:10	149:12,21 150:5
44:8 184:18	licensed 86:14	llp 1:22 2:8,14 3:9	170:6 194:4 197:4
208:13	101:6,21 202:13	3:15,19	225:21
legislator 221:2	202:17 203:12	lobbied 158:17	looking 32:14
legislators 220:14	205:2,17 255:14	local 33:10 145:15	77:22 79:6 81:4
220:16,17	256:15 260:3,23	146:1,2,4 147:2	87:25 117:9,10
legislature 146:24	261:3 268:10	151:16 171:25	134:2 234:20
187:7 192:2	269:5	258:6	243:14 245:1
217:11,17,24	lies 94:14	locally 149:5	246:1
218:23 219:16,24	life 57:10	location 61:10	looks 26:14 78:20
220:19	light 207:17,23	locations 128:3	82:1 88:6 103:2
legislatures 147:5	limit 193:20	lodges 18:8	109:16 178:7
legitimate 91:14	linda 247:13,16	long 22:21 23:12	184:21 200:10
101:7,22 203:7,11	248:21	24:9 36:14 49:21	248:7
255:7	line 84:17 95:2	54:21 67:21,24	lose 156:20 157:16
letter 275:19	113:5 117:16,25	68:19,22,22,23	157:16
letting 145:9	118:6 169:5	118:2 129:25	loss 163:3,6
148:14	275:13 277:7	196:13	lost 39:8
	278:3		

[lot - meeting]

Page 27

lot 17:9 23:19 38:18,19 152:17 259:9,17 louisiana 2:19 low 66:2,3 80:11 202:1,3 lower 66:22 lowest 82:3 lunch 161:7,15	map 66:6 marcus 3:19,22 14:22 marijuana 250:4 250:12,24 251:7 251:10,25 marilee 178:2,5 mark 26:24 223:17 marked 5:2 27:7 55:3,6 74:18 108:7,16 131:2,10 142:13,17 161:2 161:11 162:9 166:20 168:2 174:18 176:18 177:17,21 182:4,8 208:15,19 223:14 234:14,18 242:20 242:24 245:23 247:7,10 252:10 252:14 market 92:19 94:11 marketing 253:23 254:3,7,13,16 marking 26:23 mart 2:18 masked 61:5 materially 237:24 238:5,11 239:6 math 159:13 matt 7:2 247:4,19 247:22 248:22 matter 14:3 69:7 84:13 152:7 153:25 227:22 matters 16:6,11 236:14 mayor 31:11 37:9 38:2 39:2,4,9,11	39:23 232:23 mccormack 37:15 mckesson 3:8 14:25 267:17,19 mdl 1:7,9 mean 16:23 17:21 38:4,24 41:20 45:24 47:24 49:12 51:1 62:2 71:8 83:21 88:13 96:20 113:16 115:16 120:11 145:20 153:13,17 159:13 188:23 193:25 211:21 213:9,20 218:6 219:22 225:7,8,15 226:19 236:8 257:12 means 64:21 88:3 88:5 194:8 254:25 255:3 260:17 262:21,22,24 meant 33:5 111:12 measure 218:12 218:19 measures 219:3 medicaid 42:14,18 42:22,25 43:2,6,7 43:10,24 162:16 163:1,2 164:5,15 164:16,17 medical 30:22 67:20 73:11 74:19 74:24 75:14 88:4 88:7,15 91:15 94:15 101:7,22 171:15 173:7,13 187:19 188:7,13 188:16,22 189:3 189:22,23 190:20 190:22 191:2	196:8 202:25 205:24 206:8 207:7,12,17 208:25 209:22 210:19 217:18 225:19 228:11 251:4,8 255:7 261:5 medically 49:20 105:12 106:22 115:20 261:13,20 medicating 262:12 262:17 medication 86:5 100:20 132:23 133:8,15 134:7 192:21 202:5,20 203:20 232:13 255:8,13 256:16 258:15 260:25 261:12,18 262:1 268:8,20 269:4 medications 18:24 86:12,18 100:9,15 101:5,20 102:8 179:22 180:8,11 186:12 187:2 188:2 189:11 191:6 192:14 204:6,21 205:2,11 205:19,23 206:5,6 206:8 209:2 211:14 216:6 219:5 240:25 241:2 254:14,18 257:5,25 260:5 262:2 263:2,13 medicine 255:21 meet 24:4,7,9 meeting 24:11,17 176:24 184:11
m			
madam 275:10 main 1:22 2:15 225:22 maintain 31:19 major 30:20 35:22 36:8 40:15 41:15 42:7 45:7 majority 42:9 61:3 61:23,24 71:11 makers 205:22 206:5 making 56:1 63:21 144:18,24 153:11 158:4 181:21 226:5 232:24 261:19 management 208:24 211:18,23 212:8 214:12,25 215:2 217:11,25 218:3,9 231:6,21 232:1 253:21 mannix 3:20,22 14:21,22 manufactured 258:15 manufacturer 269:24 270:4,13 manufacturers 204:20 205:1,16 269:20 270:9			

meetings 24:13 52:6 73:23,24 117:2,6 175:17 176:10 226:21 227:9 member 32:11,18 41:14 92:25 143:7 146:24 149:14,24 150:7 159:2 member's 255:20 members 41:20,21 51:4,16 59:24 74:6,9 159:1,1,14 159:18 175:18 183:2 membership 41:17 182:14 memo 222:5 memorandum 170:12 memory 18:25 25:2 109:24 138:9 167:10 168:5 memos 220:20 mental 5:20 20:16 20:21 21:16,21,25 22:20,22 28:10,13 29:9,21 44:13 49:16 57:17,21,25 59:7 60:1,7,8,10 60:21 61:4,10,16 62:3,10,17 63:1,11 143:7 144:11 145:8,14,25 146:12,18,22 147:7 154:23 155:12,15 160:24 162:16,22 181:10 mentioned 120:1 122:16 124:4 125:23 129:15	143:19 151:23 269:17 mentions 170:12 message 69:9 143:13 met 24:5 meth 37:6 methamphetamine... 21:6 method 119:6,8 metrohealth 76:3 106:14 115:10 124:18 mexico 93:19 michael 70:4,11 70:13,14,24 71:5 71:13 149:17 microphone 58:25 263:7 mid 16:11,14 middle 110:17 155:11 midwest 275:17 278:1 miller 51:15 222:13 million 46:1 149:3 162:18,24 163:7 mills 264:16 miltner 167:2 169:1 172:11 mind 36:23 102:17 102:18 114:7 126:4 227:8 265:8 minds 152:12 mindset 146:10 mindsets 263:1,12 minority 71:7,8,10 83:16 minute 97:17 140:17 160:17	197:10 231:9 248:2 minutes 176:23 miscellaneous 115:21 misinterpreting 155:9 misleading 205:21 206:3 missed 160:3 missing 249:5 misspeak 235:23 235:24 misspelled 33:6 misspoke 30:1 misstated 230:14 mistake 69:20 mistakenly 203:21 mitigating 46:25 moira 3:20 14:21 moment 53:22 55:8 97:1 113:24 154:8 167:19 170:5 177:23 208:6 moms 153:2 money 42:10,10 42:15 43:22,24,25 44:1 50:1 52:25 57:12 60:11,16 61:14 71:3 81:5 82:22 83:5 84:22 102:24 103:25 104:21 107:20 115:13 117:12 120:3,6,9,18 122:17 124:5 135:11 136:21 138:5 139:17 140:12 147:18,21 148:20 151:10	221:25 229:24,24 moneys 134:15 165:16 months 32:3 130:2 morning 15:11,12 28:19,24 54:7 64:17 mothers 152:25 motor 67:8 move 208:4 moved 34:1 165:3 moving 40:16 85:19 166:23 muggings 34:9 multiple 99:20 229:12 256:5 municipal 31:2 muscle 145:3
			n
			n.d. 1:15 n.w. 2:10,19 name 15:15 113:23,25 114:1,7 130:17 159:24 167:2 178:2 220:20 243:2 247:13 267:15 269:13 275:6 276:3,4,15 277:3,4 277:21 named 32:24 266:15,18 267:25 273:9 names 37:5 51:12 270:12 nan 183:2 220:25 napoli 2:3 napolilaw.com 2:6 narcan 106:13 115:9,11 124:4,7

national 1:6 14:3 275:6 276:3 277:3 nature 34:10 47:11 179:12 216:17,19 254:16 near 139:4 necessarily 260:12 necessary 238:17 260:20 261:13,20 need 44:7,8 53:12 56:19 101:7,22 104:20 151:14 159:7 170:4 199:16 206:20 208:21 211:5 212:22,23 243:15 243:17 263:9 264:1 needed 49:20 53:4 151:9 159:2,6 206:20 210:23,25 215:6 260:12 needing 123:11 needle 115:24 needs 5:10 49:15 76:25 99:19,20 108:6,18 109:7 199:16 neighborhood 33:13 34:6 never 48:4 74:3 151:21 195:24 213:6 214:10 227:8 259:3,22 new 2:5 3:17 34:17 39:2,4 68:22 140:8 141:5 141:5 150:12,13 150:14 192:13,20 249:19	newly 23:3,8 news 96:21,22 117:3 235:1 nice 90:10 night 235:2 nine 71:12 159:2,7 nod 17:19,24 non 45:18 162:16 164:5,15,16 nonaddictiveness 270:5 nonprofit 42:13 nonverbal 17:19 nonviolent 229:11 229:12 nope 267:3 normal 17:18 normally 202:8 northern 1:2 notable 36:23 notarized 275:14 notary 14:18 273:6 274:14 275:25 276:10,18 277:15,23 278:23 note 275:12 noted 207:20 notice 77:10 noticed 77:15,17 78:1 235:16 november 55:12 56:2 66:15 75:8 85:20 108:19 118:4 number 5:2 37:4 56:17 66:1 68:6 78:22 85:10,11 96:13 110:9 132:24 142:5 148:19 166:3 174:21 185:10	189:19 191:8 192:12 212:15 224:24,25 229:20 241:23 246:2,4,9 275:7,13 numbered 78:18 numbering 85:8 numbers 42:9 49:25 65:12 66:11 67:14,22 68:24 78:25 82:21 85:8 202:6 277:7 numeral 185:1 nurse 190:12 224:10,12 nurses 224:8,9 nw 3:10 ny 2:5 3:17	10:2,3,4,5,6,7,8,9 10:10,11,12,13,14 10:15,16,17,18,19 10:20,21,22,23,24 10:25 11:1,2,3,4,5 11:6,7,8,9,10,11 11:12,13,14,15,16 11:17,18,19,20,21 11:22,23,24,25 12:1,2,3,4,5,6,7,8 12:9,10,11,12,13 12:14,15,16,17,18 12:19,20,21,22,23 12:24,25 13:1,2,3 13:4,5,6,7,8,9,10 13:11,12,13,14,15 13:16,17,18,19,20 13:21,22,23,24,25 18:3,5,8,12 23:18 36:16 37:3 39:16 44:19 53:14 62:19 63:4,13 66:20 67:17 78:13 80:4 84:11,24 86:15 87:4,12,18,22 89:17 90:9 91:17 91:21 92:15 93:20 94:8,13 98:5,11,17 98:22,25 99:6 100:22 101:2,8,23 102:14 110:2 111:22 113:3 118:17 123:14 126:24 127:8,14 127:18 128:1,11 128:23 129:3 133:10 135:14,20 136:24 137:3,23 138:11 139:18,22 141:8,17 142:3 145:17 148:7
		o	
		o 219:13 oacbha 143:9 175:7,11,25 176:12 178:8,22 182:9,14 oakar 37:18 oarrs 211:6 212:9 212:13,20 213:3 213:16 214:3,15 214:17,20 219:9 219:13 232:4,11 object 8:2 objecting 18:14 objection 8:1,3,4,5 8:6,7,8,9,10,11,12 8:13,14,15,16,17 8:18,19,20,21,22 8:23,24,25 9:1,2,3 9:4,5,6,7,8,9,10,11 9:12,13,14,15,16 9:17,18,19,20,21 9:22,23,24,25 10:1	

[objection - opiate]

Page 30

149:1 151:19	201:6 252:8,15	168:15 169:7,23	195:23 196:5
154:19 156:3,8,13	odh 5:23 166:16	170:7,10 171:20	197:11,23 199:3
157:7,14,20,23	office 51:2 67:20	172:12 173:23	201:4 209:12
158:1 169:18	74:24 75:20	175:12 178:17	220:7 221:18
177:7 181:5	212:11 248:6	179:13 181:15	230:16 231:4
186:18 193:7	251:5 274:6	183:1 184:16	235:12 236:13
195:16 200:7	officer 28:4,9 29:3	185:23 187:6	242:2 243:25
203:2,8,22 204:22	40:4 46:3,14,22	189:22 190:20	244:1 249:11,12
206:2,16 207:1,9	47:5 56:7 64:11	191:2,4 192:2	264:4 265:6,7
208:2 213:5,12	67:13,25 92:24	200:17 206:24	266:13 269:16
214:7,23 215:20	100:1 113:12,15	207:6,12,16,21	oldfield 178:2,5
221:8 222:4 223:2	116:6,16 129:2	219:23 222:25	ones 38:19 44:22
224:4 225:16	139:15 170:19	225:20 232:13	64:24 74:4 75:23
226:3,14 232:14	205:9 218:16	233:8 243:12	112:15,16 116:19
233:3,11,16,20	244:15 263:19	244:1 245:7,10,16	244:25
234:2,8 238:1	officers 38:17 39:5	245:22 252:6,15	op 1:15
239:24 240:5,11	39:12,24 40:12	252:19 253:3	open 5:17 91:6
240:16,21 241:4	official 213:24	262:11 263:24	142:10 255:20
242:11 244:21	276:15 277:21	273:2,7 274:7,15	opened 120:22
246:17 250:9,13	officials 96:11	275:2	187:7,13
250:20 251:16	145:13,20,21,24	okay 18:11,16	operating 206:7
252:2 255:9,16,24	151:16 152:12	25:13 26:6 33:7	opiate 1:7 14:4
256:10,17 257:6	oh 2:15 33:5 53:2	46:12 47:15 48:17	19:11 48:12 63:18
257:19 258:2,21	68:21 70:10,22	53:19 62:25 69:18	63:25 64:15 65:4
260:8 261:7,14,21	107:12 130:16	79:5 80:18 81:6	68:7,9 69:7,24
262:4 263:4,15	149:25 154:12	81:11,18 93:5,9	70:7 71:21 72:18
265:14 266:20	157:1 161:9	101:14 103:22	73:10,14,20 74:2
268:11,22 270:10	189:16 196:5	110:8 112:3	74:10,12,20,25
270:15	201:21 232:5	114:24,25 116:12	75:16 76:4,13,18
obtained 101:5,20	235:22 238:24	119:14 121:6	78:7 87:10 92:25
102:8	264:12,25	128:16,18 130:16	102:12 121:4
obviously 37:20	ohio 1:2,13,15,23	134:17,21 136:23	123:9 124:2
occasion 105:1	7:4 14:5 30:4 32:6	137:16,21 143:1	127:21 140:18
occasions 31:5,10	40:20,25 41:2,8,23	144:22 146:3	153:24 172:21
142:5	43:6 44:3,10,12	154:7 161:22	178:15,21 179:6
occurred 146:23	82:13,23 83:4,20	166:23 167:15,23	179:19 180:16
156:4 214:10	106:16 141:19,24	169:17,21 174:2	181:3 187:23
227:23	143:25 144:18,24	177:1,9 178:9	193:15 195:1
occurring 179:13	147:11 148:4,18	179:8 182:22	196:11 198:12
october 7:6 118:4	155:1 156:15	184:1 185:13,14	206:21 210:5
182:8 184:19	167:12,13 168:7	186:24 189:18	214:18 221:5

256:7 263:18 275:6 276:3 277:3 opiates 86:9 107:7 120:23 121:6 128:4 opinion 268:12 opioid 5:13 7:2 46:7,18,25 47:8,18 48:6,17,21 49:2 50:4 51:19 52:13 52:19 64:11,17 66:19 67:1 69:13 77:10 78:10 85:22 86:5,12,18 89:6 90:17 100:9,15,19 101:4,20 102:8 103:15 104:3 105:4,23 107:2,17 111:21 112:12,20 114:11,17 115:6 116:18 117:7 119:23 120:19 121:1,12,20 122:19 126:21 127:6 131:7,16,21 132:16 141:2,6,11 141:20 146:23 148:5 150:9,21 151:17 152:1 153:16 156:12 157:5,11 163:8 166:9 167:13 168:8,18,21 170:10 172:14,25 173:15 176:13 177:5 179:13 180:8,11,21 181:3 181:16 183:10,24 184:3,6 186:12 187:2,15 188:2,3 189:10 191:5,17	192:14,16,20,21 193:6 194:16 197:17,20 199:6 199:25 201:9,15 201:24 202:20 203:20 204:5,21 205:1,11,16,19,23 206:4,6,8,12,24 207:8 209:1 210:10 211:14 212:21 216:6 219:4 220:12 223:25 225:25 226:8,13 227:4 230:7 232:12 237:20 238:5 239:6,11,22,22 240:8,10,25 241:2 241:9,24 244:9 246:3,9,15 247:4 247:19 248:23 249:1,15 253:6 254:3,8,10,14,17 254:25 255:3,8,13 256:13 257:5,25 258:14 260:4,6,25 261:12,18 262:2 262:18 263:3,14 263:22 264:6 267:6 268:8 269:4 opioids 100:21 106:23 120:15 124:20,25 125:7 127:24 141:25 151:3 152:15 187:9,13 190:4 191:15 208:1 214:5 215:24 228:13 240:3,4 250:19 251:1 253:22 254:4,7	255:22 270:6 opoid 228:21 opportunity 22:2 25:18 115:25 118:10 opposed 59:7 176:3 228:11,23 256:14 opposite 230:9 order 58:4,19 82:2 89:16 90:5 141:5 198:22 199:4,13 199:24 249:6 ordered 22:9 orderly 16:21 organization 40:23 41:9 59:25 109:2,15 110:4 143:6 175:15 178:8 organizations 34:4 42:13 239:15 organized 82:2 organizes 125:12 original 74:4,5,9 osiecki 53:17 55:11 121:24 129:15,16,23 130:7,10 142:18 142:22 208:24 235:1 248:19 osiecki's 143:11 ought 198:4 211:7 outcome 158:20 outcomes 34:21 outlines 244:3 outpatient 126:15 outside 217:17 overall 152:13 overarching 76:12	overcome 152:8 overdose 6:24 46:8,18 47:1,9,18 48:6,22 49:2 50:4 51:19 64:12,18 66:13 67:1,5 78:11 89:7 92:14 93:12 94:20 103:16 104:4 105:5,24 107:2,18 114:11 116:18 141:7 163:9 168:18 169:10 170:1,13 171:1,12 173:15 176:14 177:5 180:22 181:4,17 187:15 188:3 192:22 199:7,25 207:8 239:22 241:10 242:4,9,17 243:11 243:12 244:2,4,9 245:4,8,22 246:4,9 250:24 251:3,7,9 251:14,20 253:7 254:8 262:18 263:22 overdoses 66:13 77:11 90:17 172:25 191:18 237:20 241:18 246:3,15 267:6 overdosing 250:16 251:21 overprescribing 260:14,14,16 oversee 29:6 30:20 35:12 overt 190:2 overtime 119:9
---	--	---	--

[owned - person]

Page 32

owned 57:9	212:8 214:12,25	parties 60:6	77:12 80:22 89:8
oxford 3:20	215:2 217:25	267:25	89:20 91:5 94:16
oxycodone 179:25	218:3,9 231:6,20	partner 73:9,20,22	96:18 118:1,3
oxycontin 179:19	231:25 253:21	76:4 187:23	123:11 145:10
p	259:4,24	193:15 194:25	148:1,13 152:3
p.m. 209:16	painkillers 240:19	196:10 263:18	153:18 156:19
271:10	paper 178:16,22	partners 60:2	157:16 171:6,7,8
pa 3:21	par 3:13,14,14	74:20,25 75:15	177:25 181:15
page 8:2 70:2 79:6	15:3	parts 22:6 96:18	188:8 220:15
102:17 110:8,10	paragraph 27:24	145:18,19 176:14	227:14 229:25
110:18 134:18,18	28:2,5 70:3,21	225:24	231:24 233:14
135:19 137:13	73:7 75:3 143:11	party 84:6 274:3	248:14
139:1 144:9 155:3	164:21 170:16	pass 159:5 161:13	percent 61:24,25
155:3,4,11 161:25	171:21 172:5	161:18	62:4,5,9 72:6,8
162:3 167:18,20	pardon 96:6	passage 43:15	128:3,4 144:12,13
170:17 171:18	224:11 228:5	164:23 207:23	146:12,12,18,18
176:18,20 179:16	234:3	passed 44:3,8 79:3	162:19 179:24
179:17 182:12,18	parentheses 28:11	185:23 189:1	229:15
182:19,21 184:25	part 45:7 53:5	passing 188:19	percentage 57:20
209:5,17 224:20	54:12 69:1 90:3	patient 202:21,25	100:13,18 102:6
230:25 231:14	92:23 102:20	203:14 261:1,13	111:5,19 112:22
232:17,21 236:23	115:14 131:24	261:20 268:9	240:1,7 256:12
243:21 245:17	146:19,20 147:12	patient's 261:5	percentages 44:15
249:5,13,19 253:1	151:4,7 172:20	patients 202:14	percordan 179:20
253:9,10 262:10	179:1 194:21	216:15	perfect 17:10
263:24 275:13,15	218:7 238:10	patrol 75:23	perfected 237:14
277:7 278:3	259:19 277:9	pattern 66:22	period 35:2 36:1
pages 81:10 82:21	participate 73:11	paul 2:9 14:10	49:19 61:25 63:7
85:7 179:5 253:2	participated 24:17	15:15	65:10 89:1 113:11
paid 40:7 119:5,7	particular 27:25	pay 40:3 43:24,25	113:13 124:14
119:9,12	38:9 51:18 57:24	57:8 60:18 107:5	149:5 161:17
pain 179:22	78:16 80:7 87:24	205:5	periods 31:1
185:24 186:2	125:25 179:5	paying 58:13	113:19 123:10
187:8 188:19	184:11,14,25	138:13	person 49:14
189:4,24,25 190:3	202:13,13,21	payment 217:11	81:19 99:11
190:15,19,23	203:14 205:14	pays 43:10	130:14,14,21
191:5,9,16 192:14	236:23	pboehm 2:11	143:19 147:8,10
192:20 201:14,23	particularly 36:23	people 19:8 21:16	190:14 199:15
202:2 203:10	37:2 51:5 64:11	25:15 37:14 38:3	202:1,18 220:23
204:17 207:14,24	171:9	38:7 40:16 61:3	260:18,20,22
208:24 211:18,23		61:23 62:5 77:10	262:24

person's 97:14 personally 89:8 276:11 277:15 personnel 16:6,11 117:24,25 118:6 118:15 119:2,22 persons 127:9 perspective 170:20,25 171:4,6 171:9 pharma 1:14 pharmaceutical 3:14,14,15 258:16 269:19,23 270:3,8 pharmaceuticals 2:13 3:13 14:15 pharmacies 262:3 268:7 pharmacist 268:21 pharmacotherapy 178:15,21 pharmacy 267:24 269:3 phase 233:15 phone 14:18 129:10,14 270:21 270:22 271:3 275:3 physician 86:14 101:22 202:13,18 202:24 203:13 255:14 256:15 260:24 261:4 268:10 physicians 201:13 201:22 203:6 205:4,17 213:6,8 260:4 pick 85:9	picked 236:9 pie 110:18 piece 44:2 187:6 pill 264:16 pills 19:11 101:6 101:21 102:9 240:10 255:21 256:13 pittsburgh 3:21 placards 103:4 place 14:5 43:12 170:10 176:8 191:18 196:2 199:9,14 200:2 215:16 219:2 225:25 232:1 273:20 placed 161:10 places 19:10 20:18 93:19 plaintiff 14:9 plan 103:2 218:10 platform 37:24 38:11 play 191:24 played 222:14 plays 42:25 258:12 please 14:6,18 58:15 115:19 183:12 245:2 275:11,11 pllc 2:3 3:4 plus 42:10,11 point 32:15 52:5 57:24 80:5,7,25 82:6 83:9,11 84:15,19 85:7,25 94:24 95:2,6 136:12 144:17,23 154:23,25 162:4 175:21 179:17	180:15 181:9 184:12 185:20 186:7 225:2,11 226:22 227:1 231:5,13 232:21 237:7,7,9,13 pointed 220:19 pointing 82:12 84:15 105:10 253:13 264:14 points 237:8,10 238:20 police 30:21 31:4,8 31:22,25 34:24 38:17 39:5,12,23 40:2,4,12 75:22 227:13 239:15 policies 32:14 215:1,2 218:3 policing 38:18 policy 76:24,24 121:6 211:18 212:9 political 219:18,23 220:10 221:6,14 222:16 politically 222:16 polster 1:10 poorly 240:20 popularity 233:13 population 79:13 79:16,20 80:6,12 81:20 84:18 99:10 99:18,19,19 153:19,19 population's 155:15 porter 3:15 15:2 portion 179:24 position 19:7 23:5 23:13 31:17	129:20 221:9 positions 16:2 29:21 possible 16:21 123:1,5 126:23 127:3 194:15,17 194:24 195:12,14 197:4,8,13,15,22 198:1,7,7 210:7 230:14 249:9 possibly 202:7 potential 38:14 217:9 248:7 power 85:2 powerful 192:14 192:16 powers 83:10 practices 262:7 practitioner 189:1 practitioners 224:10,12 pre 22:17 23:1 98:3,9 100:10,16 predicted 39:18 preparation 24:21 prepare 24:2,14 39:7 prescribe 260:22 261:25 prescribed 86:8 187:2 203:20 212:16,25 214:5 255:13,22 256:15 258:6 260:4,13 prescribers 191:4 prescribing 186:10 188:1 189:9 202:12,18 202:23 203:14 204:5 207:13,19 207:25 215:23
--	---	---	--

219:4 220:12 232:12 260:11,25 262:7 prescription 1:6 5:24 6:13 7:4 14:4 86:5,9,12,18 95:8 97:14 100:9,14,19 101:4,20 102:8 166:16 167:13 168:8,21 169:10 170:1,10,13 171:1 171:12 173:20,24 176:21 179:19 180:7,10 182:15 184:17 186:12 187:2,9,13 188:2 189:10 191:5,15 192:20 200:17 202:20 204:5,20 205:1,10,16,19,23 206:4,6,7 207:25 208:12 209:1 210:16 211:1,6,10 211:14 212:17 214:5 215:24 216:6 219:4 232:12 240:10,19 240:25 241:2,9,18 241:24 242:4,9 244:8 246:2,9,15 250:18,25 252:6 252:15,20 253:4 253:22 254:17 255:8,12,22 256:6 256:13 257:5,25 258:14 261:10,12 261:18,25 262:11 263:1,12,25 264:23 268:8,9,19 269:3,4 270:6 275:6 276:3 277:3	prescriptions 190:19 203:6 presence 273:15 present 3:23 86:1 88:1,16,20 129:17 presentation 55:12,16 56:2 72:2 75:5,11 80:8 85:21 102:21 109:6 224:2,15 231:1 232:7,16 234:21 238:20 presentations 56:8 56:15 110:5 223:25 presented 81:2 104:7 141:11 165:20 presenter 55:15 preserve 18:5,14 president 32:23 51:11,13 175:7,15 175:20,21,23,24 176:3,4,7,8,8,12 176:12 press 182:17 pressure 94:25 95:7,12 189:25 pressuring 95:19 96:8 97:11,23 presumably 111:2 pretty 37:22 53:20 212:2 prevented 72:3 prevention 5:24 63:17,24 64:7 69:1,12,23 70:5,7 70:25 71:1,22 72:3,12,21 75:6 104:8,9,11,12 105:12 116:8	117:1 126:14 162:17,23 166:17 previous 66:21 139:12 previously 22:16 43:2 58:5,20 220:20 primarily 35:7 230:18 primary 35:25 38:11 134:11 print 171:21 prior 21:23 48:3 48:14 prison 229:13,24 private 44:18 111:2 probably 15:24 17:10 57:25 60:21 118:24 123:16 155:10 problem 38:22 63:11 76:21 85:17 99:9,10 153:7 166:9 179:7,13 185:2,22 196:15 196:16,17 197:20 206:13,25 221:24 230:7,8 problematic 37:2 problems 29:10 33:13 34:5,16 36:8 153:8 206:21 procedure 53:5 272:7 276:5 277:5 process 50:20 86:23 216:23,25 218:4,7,9 produced 26:9 27:13 135:24 178:14 224:22	production 209:7 258:9 275:15,17 275:22 products 16:4 professional 60:8 60:10 profitability 95:9 program 56:20 106:13,15 109:23 115:25 124:17 147:20 programs 31:13 56:25 77:6,7 107:6 109:16 116:8 165:2,16 progress 97:15 project 109:23 115:9,10,11,14 119:11,12,19 124:5,7,11,12 projected 138:18 promote 254:17 pronouncing 150:2 proof 70:6 71:1,18 71:24,25 72:9,16 proper 204:1 210:15 211:1,13 properly 199:5 properties 57:9 propose 64:7 proposing 145:1 prosecutor 75:21 prosecutor's 75:20 protect 56:18 protector 35:17 protocols 231:6,21 232:1 proud 54:12 prove 72:2,12 75:6
---	--	--	--

[provide - read]

Page 35

provide 20:20 31:12 35:21 49:8 57:16 58:6 70:6 71:1,18,22,24,25 72:15 84:22 85:3 109:20 123:25 133:7 165:13 195:7,8 199:15 211:11 provided 15:5 52:18 57:21 83:6 112:7,10 134:23 135:2,4,7 136:16 136:22 138:23 140:21,25 144:3 146:1,2 178:1 222:19 provider 57:6 121:23 122:1,2,3 123:16 203:19 providers 20:20 43:4,5,25 44:1 121:10 122:5,14 123:21 138:7 204:6 205:3,18 216:4 provides 44:25 45:4 127:19 providing 58:6,21 82:13 150:8 psychiatric 126:16 psychiatrist 62:23 public 30:12,18,19 31:17,20 40:3 54:15 64:5 65:16 68:15 69:6 75:7 76:24,24 90:6,23 117:2,6,20,24 141:11 145:13,19 145:20,24 152:12 198:23 226:20	227:8 273:6 274:14 276:10,18 277:15,23 278:23 purdue 1:14 266:11,12,13,13 269:17,19 purified 237:14 purpose 25:5 41:4 49:5,8 50:3 56:14 64:15 76:12,18 80:15 103:15 108:17 121:4 purposes 27:8 55:3 102:24 108:8 131:10 134:6 140:14 142:14 161:3 166:20 174:19 177:17,21 182:4 208:16 223:14 234:15 242:20,24 247:7 252:10 255:7 pursuant 272:3,6 pushed 207:15 put 58:7,22 72:21 72:23 73:1 88:10 88:14 91:5 103:3 106:1 119:9 126:25 127:1,9 132:24 158:5 198:2 219:2,10 227:14 229:13 putting 96:25 189:24 229:10	quantify 194:7 quarters 176:19 182:20 question 17:1,2 18:5,9,12,14,17 28:21 46:9 50:11 58:15 68:4 69:16 74:8 90:1,4 93:3,6 97:4 99:24 104:22 104:24,25 106:19 107:10 114:18 116:10,21 118:18 118:23 119:1 122:13 127:13 128:15,16 129:6 129:12 132:4 147:25 148:10 154:4,6 158:7,8,8 167:9 170:2 172:7 172:18 176:9 195:11 196:3,20 196:22 197:1,2,10 197:12,13 199:1 199:18,21,22 201:2 202:3,9 203:17 205:13 213:19 217:13 220:7 228:15 229:7 230:14 237:1 238:8,10,15 239:1,18 241:15 243:19 245:2,19 248:4 251:17 254:13 257:15,21 259:12,16,18 261:16 263:9 264:1,8 265:7 269:2 questioned 70:4 70:24	questions 15:17 18:3 26:4 110:13 158:5 185:5 193:18 194:1,11 224:17 252:23 253:24 266:3 269:8,16 270:18 270:21,22 271:4 quite 152:19 190:12 213:15 246:16 quota 258:9 quote 187:7
			r
			r 135:9 219:10,13 219:13 race 39:8 radio 103:4 raise 83:11 141:5 rallying 226:22 ramifications 89:13 ran 34:2 38:2 124:17 176:9 random 37:4 range 175:17 rare 119:20 rarely 76:20 117:24 rate 190:1,1 246:19 rates 77:23 reach 69:6 reached 170:8 253:5 reaches 169:2 reaching 169:6,24 reacted 66:9 reacting 95:16 read 20:3 25:13,19 27:21 28:7 55:19

[read - reflected]

Page 36

70:21 162:19 164:20 167:19 172:4,9 174:7,8 180:3 185:7,8,12 185:15 209:14 217:21 231:16 239:17 266:5 276:5,6,12 277:5,6 277:17 reading 144:20 235:15 275:19 reads 95:7 180:16 ready 243:25 real 52:6 realities 230:1 reality 212:3 realize 77:21 really 34:19 63:8 84:12 85:4 87:13 117:10 148:22 198:23 270:11 reask 263:9 reason 18:20 61:11 97:20 99:7 113:17 138:22 244:23 245:3,14 245:20 275:14 277:8 278:3 reasonable 211:18 214:25 215:6 reasons 53:7 61:6 172:23 199:8 200:1 recall 16:9,15 25:9 32:21 36:5 37:24 39:11 46:20 47:3 47:20 48:10,14,18 48:25 49:5 50:1 51:25 56:1 59:14 63:21 69:21 74:12 75:10,12 77:14	78:3,5 80:15 81:3 103:11,18,25 105:20 106:4,10 106:24 107:14 112:25 124:22,24 141:18 143:24 144:1 154:9 163:4 173:17,18,23 175:1 176:11 178:20,23 183:13 210:6 213:13 216:2 220:1,2,8 223:24 224:2 252:19 253:3,18 253:19 receipt 275:18 receive 20:17 111:15 168:11 received 50:7,9 143:13 164:25 165:1 178:20,24 180:20 189:21 216:8 239:15 248:5 receives 45:9 receiving 29:7 165:7 166:2,6 178:23 212:14 221:25 reception 146:22 receptive 147:21 recess 53:25 108:1 160:20 235:9 265:23 recession 154:11 154:17 155:8,20 156:1,11 157:5 recipient 136:1 169:3 recipients 131:15 176:25	recite 188:5 recognize 93:8 108:22 recognized 78:9 78:11 89:5 recognizing 64:24 recollection 34:23 48:3 71:16 82:11 recommendation 211:16 recommendations 7:5 59:22 109:17 210:9 217:9 252:8 recommending 61:13 record 14:2,7 15:14,14 16:18 17:6 20:9 53:22 53:23 54:1 55:10 79:5 107:23,24 108:10 123:12 124:10 125:5 130:13 160:17,18 161:5 177:24 178:24 196:14 208:22 235:6,7,10 235:13 236:11 239:3 259:21 264:13 265:20,21 265:24 271:8 277:9 records 225:18 recovering 229:20 recovery 19:8 49:22 132:8 216:21 225:9 231:24 reduce 145:1 reduced 144:13 229:19 273:14	reducing 46:25 153:4 reduction 155:12 refer 59:19 68:2 181:3 206:12 248:14 reference 27:25 28:22 66:12 98:14 155:7,19 164:4 182:25 275:7 276:2 277:2 referenced 56:3 70:20 116:20 139:9 141:1 252:16 273:13,18 276:11 277:15 references 29:24 30:2 40:19 126:1 179:25 249:22 referencing 221:13 referred 64:17 68:3,8 143:17 154:11 185:24 206:24 254:23 referring 35:3 43:20 65:13 66:12 66:16 77:18 123:25 181:16 191:14 236:4,11 249:7 refers 59:23 60:21 63:16 132:7 204:10 232:22 refill 260:19 reflect 82:22 110:20 132:19 253:13 reflected 127:5 245:7
--	--	--	---

reflection 150:18 191:24 reform 182:16 184:18 refresh 167:10 168:5 refreshed 25:2 refresher 16:17 regarding 82:11 131:20 147:3 270:4 272:2,11 registered 216:8 regular 29:12 96:16 regularly 56:6 related 19:21,25 34:16 48:16 51:7 56:8 59:11 67:1 86:2 88:1,16,18,21 106:23 111:21 112:12,20 114:10 114:17 115:6 119:23 120:15,19 121:21 122:18 124:2,19,24 125:7 126:21 127:6 141:2,25 150:20 163:3 176:13 177:4 179:23 180:12 181:3 183:9 190:16 235:19 239:22 241:9,18,24 242:4 242:9 246:4,9,15 relates 1:12 84:17 relation 52:13 68:7 205:10 243:21 252:24 relationship 62:15 73:17 109:10,14 240:18 259:2	relative 31:12 44:14 72:12 80:11 147:12 211:5 239:13 274:2 releases 96:17 reluctance 145:13 145:24 150:7 reluctant 153:21 remaining 139:2 remarks 6:17 223:12,20 remember 24:24 32:15 34:19 36:4 37:5,19 39:25 42:8 44:20 45:13 49:24 50:6 51:23 51:24 52:3 67:9 69:14 70:1 73:4,5 74:15 75:24 78:24 107:12,13 112:15 112:25 114:1 117:15 120:8 129:5 130:17 132:5 133:18,18 133:23 135:17 136:8 140:7,8,9,10 140:11 141:14,21 141:23 142:2,4,6 144:5 149:21 158:23 159:12,20 159:24 168:11,12 168:15,19 174:3,4 184:5 211:24 215:4,25 216:1,19 217:3,4 248:1 remind 17:12 175:10 reminded 17:15 reminder 16:17 removed 31:10	renewed 160:5 rent 103:3 rep 6:12 37:18,19 208:11 repeat 46:9 58:14 197:13 replace 118:3 129:19 report 6:24 7:5 29:10 88:11,14 109:14 174:1,4,8 180:1 185:16 187:14 201:7 202:2 242:17 243:11,22 244:2 245:16,23 252:7 252:15,17,21,24 254:1 262:11 263:25 reported 232:4 245:22 reporter 4:14 17:7 17:11 219:13 276:7 reporter's 4:11 273:1 reports 31:14 66:21 represent 27:12 208:22 269:13 representative 70:14 183:3,5,6,9 183:16,19,23 184:6,21 185:20 192:1 200:4,12,16 200:23 201:7 206:11,23 207:12 220:21,25 221:23 representatives 168:6 184:17 204:25 205:15	222:14 representing 15:15 70:15 republican 71:11 84:6 republicans 71:12 83:25 159:19 request 47:17 48:9 49:1,23 50:13 53:10 59:11 63:16 63:21 64:3,4,8 68:6 69:12,22 70:8 71:17 102:22 103:9,20,24 104:3 104:5,16 105:3,23 106:2,2 107:1,17 119:21 132:14,20 133:14,24 151:6 277:9,11 requested 48:5,20 50:2,8 52:19 56:23 60:14 71:2 85:4 103:23 106:20,21 107:19 107:20 133:8 150:20,25 272:1,6 272:10 requesting 58:4,19 260:18 requests 47:7 48:15 49:7 50:17 50:18 52:12,24 103:14,22 143:12 150:22,23 require 86:18 required 39:23 40:11 202:4 210:21 232:13 275:25 reschedule 60:9
--	---	---	--

research 173:5 researched 240:20 reserve 118:3 134:10 139:9,24 139:25 140:1 reserved 139:12 reserves 139:3 residential 132:7 residue 134:10 resigned 34:4 resolution 159:5 resolve 221:24 resolver 153:8 resources 42:23 respect 17:11 34:14 38:7 84:9 103:19 140:20 189:10 220:10 233:18,24 234:4 respectfully 199:18 respective 41:10 respects 34:14 respond 90:6 163:8 166:9 168:17 199:24 227:5 responded 226:12 227:3 228:13,21 response 131:21 132:16 150:8 228:3,9 responsibilities 20:13 21:15 29:3 29:5 31:20 32:10 32:18 41:13 92:23 152:6 175:14 256:23 257:3,23 responsibility 21:20 89:19 113:20 138:13	148:5,13,14 151:17 193:6,10 207:7,17,23 260:6 responsible 113:10 130:20 195:19 251:13,20 267:5 rest 41:16 result 87:15 99:22 188:8 191:10 resulted 92:13 269:24 resulting 93:11 118:5 resume 5:4 27:6 27:16 37:8 40:19 54:20 retained 4:14 retire 23:24 retired 23:21,22 152:20 244:14 returned 275:18 revenue 44:15 79:9 82:23 110:21 140:22 162:15,22 review 25:6 167:25 203:5 215:7 272:2,6 275:12 276:1 277:1 reviewed 24:20,23 25:2 reviews 86:23 revised 191:3 reyes 208:24 209:19,21 210:4,9 213:9 217:6,23 219:8 richardson 113:21 rid 212:11	right 17:17 19:1 20:7 21:17 26:12 26:17,25 30:4 35:3 40:23 45:1 58:8 77:19 78:7 79:23 82:4 84:23 85:11 88:12 90:4 91:15 92:2,10 94:6,7,9 97:18 98:16 101:17 102:9,25 103:5 104:17,18 105:5 106:16 107:9 110:10 111:3,10 113:23 114:2,21 122:8,11 125:16 126:14,15,17 132:17 135:2,5,12 135:18 136:2 137:2 138:19,21 142:25 144:2 148:25 150:3,9,23 155:4,10,11 161:15,16 163:14 163:17 166:23 167:6 169:3,11,20 175:8 176:22 177:6,8 178:8 179:14 184:22 192:5,7 196:3 200:5 203:1,15 209:22 215:10,16 218:24 219:10 221:12 225:4 228:22 229:6,23 230:14 232:8,13 233:19 234:1,6 235:2 236:13 237:10 241:7 244:20 246:5,7,16 246:23 249:4,23	255:5,8,15 262:14 264:8 265:19 266:12 269:8 ring 186:9 255:4 risk 35:13 risks 260:24 road 38:23 robert 183:3,19 184:21 role 19:16 20:17 31:15 32:16 87:8 160:12 164:23 176:3 204:2 222:14 237:19 258:11 266:25 roles 68:18 roman 185:1 room 154:14 179:23 180:12 225:4,8 rooms 227:15 rose 179:23 rosemary 37:18 rough 131:21 roughly 57:20 routinely 56:8 royer 243:2,3,5 244:3 rpr 1:24 rs 219:14 rule 17:16 rules 16:19 272:3 272:7 276:5 277:5 run 38:2 83:25 97:14 220:15 running 37:12,14
s			
s 135:9 219:11,13 275:15 277:8,8 278:3			

[sacks - see]

Page 39

sacks 2:4 14:8,8 16:16 18:2,8,12 23:18 24:4,5,7,12 24:16,25 27:11 36:16 37:3 39:16 44:19 53:14 62:19 63:4,13 66:20 67:17 78:13,22,24 79:3 80:4 81:12 81:15,17 83:1,3 84:11,24 86:15 87:4,12,18,22 89:17 90:9 91:17 91:21 92:15 93:20 94:8,13 98:5,11,17 98:22,25 99:6 100:22 101:2,8,23 102:14 110:2 111:22 113:3 118:17 123:14 125:15,18 126:24 127:8,14,18 128:1 128:11,23 129:3,5 129:9 133:10 135:14,20 136:24 137:3,23 138:11 139:18,22 141:8 141:17 142:3 145:17 148:7 149:1 151:19 154:19 156:3,8,13 157:7,14,20,23 158:3,10 169:18 177:7 181:5 182:18,22 185:8 185:12 186:18 193:7 195:16 196:19,25 200:7 201:1,4 203:2,8,22 204:22 206:2,16 207:1,9 208:2	209:3 213:5,12,18 214:7,23 215:20 220:6 221:8 222:4 223:2 224:4,20,24 225:16 226:3,14 231:11 232:14 233:3,11,16,20 234:2,8 235:13,14 235:23 236:5,13 238:1,7,17 239:24 240:5,11,16,21 241:4 242:11 243:15 244:21 246:17 249:5,11 250:9,13,20 251:16 252:2 255:9,16,24 256:10,17 257:6 257:14,19 258:2 258:21 259:11 260:8 261:7,14,21 262:4 263:4,15 264:20,24 265:2,6 265:14 266:20 268:11,22 270:10 270:15 271:5 275:5 safer 229:25 safety 16:10 30:3 30:12,18,19 31:15 31:20 54:11 65:16 68:15 75:7 salary 40:5 119:7 save 76:14,19 147:18 saves 147:20 229:24,24 saw 25:4 38:25 64:25 66:8 172:8 saying 48:8,9 84:8 96:22 99:15	104:20 121:6 150:16 181:20 190:16 194:3,12 194:14,20,22 196:6 212:22 218:22 238:24 254:2 259:22 says 18:12 28:3 64:14 70:3,23 87:25 135:18,21 135:23 136:6,15 137:14,24 139:1 144:10 162:14 169:6 170:15,17 171:23 176:20 179:17,22 186:1 187:5 189:21 192:23 203:10 217:7 225:3,11 226:4 231:5 232:9 232:18 237:13 248:9 262:12 264:15,22 scam 265:5,6 scams 264:23 schematic 79:24 81:7,18,24 253:11 253:16 262:14 263:24 school 34:18 schools 227:9 scientific 173:13 scientists 173:7 scott 53:17 55:11 121:22 129:16 142:18 248:18 screen 96:17,20 script 212:11 232:6 234:20 seal 274:6 276:15 277:21	second 32:2,3 39:5 59:15 61:20 70:2 79:17 111:6 133:5 146:20 167:20 170:16 176:18 179:17 182:19 189:19 209:4 211:16 218:6 237:6,7,9,13 243:15 259:19 264:19 265:3 section 162:1,8 163:15 172:9 179:6,11 180:16 182:25 185:1,10 185:11,12,16,19 185:21 189:19 200:13 224:14,18 225:3 231:2,12 252:24 253:10 security 212:15 see 27:12,17 28:4 28:16 50:23 56:25 57:3 59:17 63:18 70:9 71:3 73:12 75:8 79:10,24 80:18,23 81:20,24 85:23 86:2 95:3,9 97:3 99:17,18 108:20 109:4,8,9 110:17,19 112:3 116:1 125:12,20 126:1 131:17,22 132:8,25 134:24 136:17,18 137:13 137:24 138:4 139:4 142:20 143:2,14 144:15 144:16 146:17 149:18 153:5 155:15 162:2,11
---	--	---	--

[see - similar]

Page 40

163:22 165:4 167:3 169:5,15 170:21 171:20,22 172:2 176:20 177:2 178:3,10,11 178:18 179:9,12 180:1,18 182:10 182:13,23 184:19 185:2 187:9,10 188:10 190:4,5 192:16 197:12 202:24 204:11 209:19 210:12,14 210:16 211:8,17 214:25 217:14,19 218:4,7 219:20 223:21 224:18 225:5 231:3,8,9 232:19,20,25 234:23 237:2,16 238:21,24 243:13 244:5,8,19 247:13 247:20 248:24 249:15,19 250:4 253:10,14 254:4 262:15 269:9 270:20 seeing 216:25 seek 41:17 seen 54:20 169:22 253:17 select 111:14 self 33:12 262:12 262:17 senate 141:24 142:24 143:25 144:18,24 146:23 155:1 156:16 send 248:21 sender 131:1	sending 129:13 142:23 248:10 sense 17:8,9,25 18:15 45:23 53:7 53:13,15 146:15 193:18,19 229:10 237:8 sensitive 41:15 sent 132:1 142:18 170:13 175:3 177:24 209:15 244:3 247:12 sentence 75:3 80:17 248:12 separate 31:5 separately 238:19 september 6:11,12 208:9,10,20 209:16 serious 145:10 serve 31:1,16,24 73:17 166:3,12 served 16:2,9 28:12 30:3 31:4 33:25 serves 28:3,8 service 3:19 14:23 45:15 54:15 114:23 121:10 123:21 138:7 144:11 163:25 services 20:20,24 21:16,21,22 22:7 28:10,15 29:9,16 29:20 30:22 35:11 35:19,21 36:3,10 37:1 43:8,9 57:14 57:15,17,18,19,21 57:22,23,25 58:1,5 58:20 59:7,21 60:18,22 61:10	68:17 75:19 111:20,21 121:20 123:11,25 126:14 126:16 127:20 132:23 133:9,15 134:7 137:15,25 138:12,14 144:14 145:15,25 155:13 162:18,23 163:20 164:17,18 165:4 195:7,9 248:8 serving 31:8 set 34:1 66:22 103:23 123:6,7 140:2 146:24 174:11 177:9 208:5 214:21 245:16 274:6 setting 103:9 seven 33:24 43:13 78:20 159:6 sfranklin 2:21 shake 17:20 shapira 3:19 14:22 shapira.com 3:22 share 151:16 207:22 216:21 260:5 shared 52:8,10 106:4 188:16,17 shares 207:7 sharing 84:20 shayna 2:4 14:8 118:24 271:4 275:5 sheet 5:21 160:25 275:13 277:7,10 277:18 278:1 sheriff 73:10 74:19 75:14	sheriff's 74:23 shirlethia 2:19 14:16 shkolnic 2:3 shopping 256:2,4 256:9 short 31:1 39:21 54:4 69:9 108:12 130:3 236:17 266:2 shortfall 39:1,18 39:19 show 80:9 82:25 142:16 186:15 189:14 showed 243:20 showing 82:18 234:17 242:23 247:10 252:13 shown 275:16 shows 79:12 sick 157:16 198:17 side 79:23 159:24 sided 125:19 209:3 sign 189:24 190:23 191:16 207:15 212:11 232:6 259:5,25 signal 17:19 signature 272:5 274:13 275:14 signed 276:13 277:18 significant 36:19 239:21 significantly 40:9 191:10 signing 275:19 similar 219:24 234:19
--	--	---	--

[simple - started]

Page 41

simple 92:1 147:16 sincerely 275:21 sir 18:19 29:1 108:14 110:16 126:13 144:8 155:18 271:7 275:10 sit 194:7 sitting 97:9,20 107:14 124:23 situated 202:19 203:13 six 32:3 33:24 78:20 130:2 159:6 size 115:9 skim 55:18 252:18 skip 60:21 skipping 179:21 slate 138:10 slide 59:2 78:19 80:8 81:7 85:10 85:20,22 87:24 94:24 102:20,22 109:5 110:8,9,11 110:13,15,20 125:11,12,15,17 125:20 126:8 127:5 slides 55:23 78:16 85:8 slightly 79:20 112:8 125:14 small 45:14,21 46:1 120:9,10 snorted 237:15 sober 49:21 103:21,25 105:13 106:22 107:20 115:21 122:16,18 123:8,24 125:23	126:1,3 132:8,15 132:24 133:9,16 134:8 social 22:7 212:15 soft 38:3 solutions 3:13 109:3 275:1 278:1 somebody 19:20 37:20 75:18 83:17 99:3,13 115:22 121:7 127:1 129:13 153:21,24 167:2 178:2 181:20 188:15 190:16 194:24 198:4 203:10 205:6 209:24 235:18 236:1,6,8 243:2 247:13 255:19 somewhat 176:5 sore 83:9 sorry 30:1,8 53:18 58:11,13 69:15,17 70:18,22 81:9 101:13 116:9,11 124:14 125:2 126:13 130:5 146:5 150:2 160:7 169:14 199:3 201:3 215:9,11 231:10 237:5 sort 78:19 sound 26:5 sounds 271:2 source 42:7 45:3 45:11 83:9 92:17 96:24,24 134:5,11 140:2,22 sources 39:21 42:5 44:15 45:10,18	82:23 92:3 96:25 110:20 134:5,12 139:8 140:1,5 speak 17:22 161:21 198:15 speaking 93:9 specific 33:13 34:5 47:7 49:5,8 69:9 104:16 106:24 107:1 109:23 119:19 121:21 140:13 142:5 160:6,7 161:13,19 168:12 183:13 204:24 205:6 210:14,21 211:12 214:10 216:3 243:18 261:24 268:3 269:18,22 270:2 specifically 29:11 46:6,16,24 47:8,17 48:5,15,17,21 49:1 50:3 51:6 60:14 103:14 104:3 105:2,4,22 107:17 112:19 114:17 115:6 116:7,17 119:23 122:18 132:15 144:1 153:15 170:15 182:10 188:6 213:13 215:5 217:3 220:1,2,8 269:17 specificity 122:25 specifics 53:3 185:19 specified 273:21 specify 259:18	spelling 219:9 spend 72:4,6 87:13 103:25 118:20 120:19 124:6 spending 79:8 80:10,13 82:3,4,9 84:9 119:3 134:10 spent 30:11 89:25 117:12 119:16,22 120:6 122:18 127:5 139:16 spike 249:22 spoke 184:6 sponsored 185:2 185:22 206:13,25 sprague 6:12 183:3,4,20,23 184:6,22 185:20 192:1 200:5,13,16 200:24 201:7 206:12,23 207:13 208:11 220:21,22 ss 273:3 ssacks 2:6 stability 56:18 stages 95:16 stamped 79:6 stand 140:17 221:11 standards 181:14 stands 20:12 175:11 start 17:3,12 67:1 68:3 77:22 93:4 101:11,13 117:22 121:22 125:4 168:17 170:14 172:17 183:5 228:6 242:1 started 66:3 67:3 131:19 133:19
---	---	---	--

[started - summary]

Page 42

149:2 starts 85:8 162:13 state 16:2 20:18 22:2 26:12,15 29:25 30:4 32:7 32:11,14,18 37:17 37:19 41:2,6 42:10,17 43:6,22 43:24 44:17 54:10 54:15 61:11,11 70:14 79:16 82:10 82:12,15,22 83:4,7 83:11,20,24 84:5,7 84:16 96:18 111:1 115:15 144:12 145:14,24 146:16 146:23 147:1,5,11 148:4,15,17 149:8 149:8 155:1 162:10,13,15,21 163:6 168:18 169:11 176:15 185:2,22 191:4 195:20 206:13,17 206:21,25 207:5 208:25 217:18,24 221:2 222:13 229:16,24 233:8 273:2,7 274:15 276:10 277:15 stated 88:17 statement 74:17 97:10,19 156:23 190:18 196:21 199:1,3 276:13,14 277:19,19 statements 95:17 205:22 206:4 270:3 states 1:1 73:8 75:4 85:25 86:19	192:12 193:5 256:20 257:2,22 258:12,16 263:13 267:2 statewide 145:20 station 234:22 236:25 238:21 statistical 102:1 statute 15:6 stay 23:12 130:3 198:16 steadily 163:21 164:1 244:11 stealing 34:22 steinmetz 2:14 4:9 14:13,13 269:11 269:13 270:17 stenotypy 273:14 step 198:17 stepladder 66:5 steward 195:8 stewards 151:12 stick 107:10 128:17 sticking 136:12 stigma 147:14 148:1 151:23,25 151:25 152:11 153:12,14,21 154:1,4 stolen 34:8 stood 222:16 stop 65:4 256:24 stored 262:3 stores 2:18 straight 66:6 strain 156:21 strategy 249:14 stream 137:12 street 2:10 3:5,10 3:16,21 97:16	streets 86:7 stretch 236:18 strickland 173:19 173:25 strictly 45:8 strip 115:22 strips 120:2,3,7 strong 91:12 stronger 76:24 77:5 strongholds 84:7 structure 85:2 studied 26:10 196:14 study 6:13 59:21 182:16 184:18 200:17 208:13 stuff 147:23 216:10 sub 95:6 237:6,10 237:13 subject 5:4,6,13 5:16,20,23 6:2,12 6:16,20,23 7:1 27:5 54:25 63:3 131:7,16 142:10 160:24 166:16 171:1,11 174:16 175:4 208:10 223:11 234:12 242:17 243:10 247:4,19 subjects 183:9 submit 50:21 submitted 25:20 104:14 266:6 subscribed 276:10 277:14 278:21 subsidy 42:8 substance 20:25 49:11 57:22 58:1	59:7 60:24 61:5 62:6,9,18 63:2,11 84:10,14 87:3 98:20,21 99:4,5 100:4,5,11,16 121:12,13 124:1 127:17 128:9,20 152:14 153:15 156:2 226:10 240:14 258:14 substances 21:12 35:6,25 36:5,22 92:13 93:11 98:3 98:10 121:2,21 228:24 257:4,24 substitute 144:5 suburban 225:12 226:23 230:11 suburbs 70:15 225:18,21 succeeding 39:2 successful 148:20 223:3 suffer 100:4 156:20 suffering 21:16 suggest 151:8 250:23 suggested 259:14 suggestions 175:20 suggests 190:18 suicide 72:2,3,5 suicides 65:18,22 suite 2:15 3:5 275:2 sum 62:8 summarized 58:18 summary 125:12 126:1 138:19 236:23
---	---	--	--

[super - thank]

Page 43

super 94:1	t	246:6,20	tenure 139:15
superior 275:1	table 60:6 269:9	targets 225:22	term 49:21 64:20
support 162:17	tackling 249:14	task 7:5,5 73:10	64:21,23,25 65:9
supported 106:12	take 16:23 55:8	73:15,18,21 74:2	77:12 78:10 96:9
supporter 150:11	67:19 113:4,5	74:10,12,20 75:1	140:10,11 169:15
supposed 161:20	116:24 118:7	75:16 76:5,13,18	219:9 254:20,22
sure 16:16,20 26:7	123:10 132:3	77:4 78:7 87:11	256:1 260:15,16
46:11 48:1 51:13	145:4 147:2	89:9 90:13 92:25	termed 222:15
58:16 63:5 85:15	194:15 195:2	102:12 118:21	terminology
86:16 98:7,12	197:5,16 198:5	172:21 173:20,24	187:14
101:10 107:10	202:25 221:9	176:21 187:23	terms 38:17 47:10
112:5 114:6,8,8	235:4 243:17	193:16 195:1	56:16 65:16 78:2
115:4,8 125:5	248:3 255:21	196:11 198:12	80:6 89:6 116:24
145:6 167:22	262:1	221:5 252:6,7,16	128:5 145:8 149:9
195:6 211:7 218:8	taken 1:21 53:25	252:20 253:4	153:14 171:11
226:5 227:7 228:8	89:12 108:1 128:4	262:12 263:18,25	172:24 183:14
230:13 236:14	153:5 160:20	tax 40:8,9,10,15	191:14 200:18
243:17 245:3	191:18 225:25	taxed 180:17	225:9 227:18
251:18 259:21	235:9 265:23	taxes 45:5 141:5	228:10 237:20
262:20	273:20	team 59:16,22,24	246:14 258:13
surface 200:9	takes 118:2 167:1	60:3	test 120:1
212:2	talk 17:12 35:3	tech 34:18	testified 184:10
surfaced 214:19	38:20 39:19 41:19	technically 181:13	testify 18:21 142:5
216:11	48:15 50:25 53:12	television 234:22	143:25 146:9,25
surgery 91:5,6	65:11 147:6,7	236:24 238:21	148:18 273:10
surplus 139:20	153:12 155:20	tell 20:11 38:23	testifying 141:19
surprise 186:17,19	197:7 220:17	58:17 61:21 68:13	141:23
survival 57:10	227:9	89:11 107:3	testimony 5:17
suzanne 142:19	talked 143:6	113:18 117:13	6:12 16:8 19:15
switch 95:7,13,20	147:22 174:24	124:8 152:5	54:6 64:16 127:23
96:9 97:11,23	186:16 187:24	183:12 184:15	128:2,6 142:11,23
98:16	197:6 198:19	193:24 216:23	142:24 143:14
switched 225:17	203:12 207:13	264:9	144:3,4,10,18
sworn 15:6 16:8	219:22 253:20,23	telling 137:5	146:25 147:3
273:10 276:10,13	talking 16:23	temperature	155:1 188:25
277:14,18 278:21	17:19 43:1 45:8	190:1	208:11 273:13,17
synthetic 91:4,12	70:19 113:7 122:7	ten 163:21 165:25	276:6,7 277:6,9,12
system 31:2	125:18 153:18	tense 136:19 137:1	testing 120:3,7
180:18 214:20	161:14 184:15	137:4	thank 15:17 27:23
systems 201:13	220:24 231:11	tenth 3:10	33:1 37:23 54:17
	233:2 236:12		54:19 59:4 83:2

[thank - totally]

Page 44

161:9,22 162:6 174:11 185:13 209:11 236:19 266:1 270:19 271:7 thanks 81:16 85:16 theft 264:11,18 theirs 258:4 thing 111:25 185:9 210:13 212:25 222:18 229:23 246:23,24 265:9 things 6:3,9 23:19 25:3 34:9,22 37:6 40:17 47:11 48:13 49:9 56:17 77:1 99:14 115:22 148:22 150:15 152:21 153:2,9,17 174:16 175:5,6 182:2 196:12 218:2 227:12,17 238:18 think 39:14 41:25 44:6 47:2,21 52:7 60:20 61:18 65:5 67:3 68:21,22,23 73:3 74:7 79:17 82:24,24 88:5,17 90:10,11 100:7 102:15 105:16,25 106:6,12 107:3,12 109:3 116:3,13 117:21 122:8,10 122:11 123:23 128:14 129:13 140:16,17,19 149:13,14 151:14 151:20 152:20 154:5,6,14 155:8	158:9 164:13 171:7 187:17 191:23,24,25 194:9,21,22 195:13,21,24 197:10,22 198:7 198:15 199:10,12 199:23 200:3,25 202:15 203:23,23 204:2 212:17 232:10 238:7 239:13 245:18 259:7 260:16 264:22 265:4 268:17,22 271:6 thinking 154:5 third 27:24 60:20 125:24,25 161:24 171:21 172:5 225:2 231:5,13 237:4 239:14 249:18 264:20 thirty 275:18 thought 22:6 65:6 70:18 74:3 124:13 133:19 134:2 146:3 149:25 151:21 152:17,18 198:6 210:20 211:22,25 215:11 227:19 228:18 251:23 252:3 three 40:4 47:22 47:23 71:11 99:14 123:17 159:14,17 176:19 182:20 200:13 threshold 202:2 thumbs 85:16 tied 173:9	tim 37:15 time 16:7,13 17:12 18:15 29:20 30:11 31:1,21 32:1,2,2,3 32:13 34:17,24 35:2,4,7 36:1,24 38:10 39:17 46:2 46:11,13,21 47:4 48:24 52:4,4,8,8 52:10 57:24 60:11 64:10 66:8 67:4 68:12,22 72:4 77:16,16,18,19,19 79:19 80:5 81:9 87:13 89:1,12,25 96:2 97:2,7 112:1 112:1 113:11,13 113:19,25 116:5 116:15 118:2,13 118:16,20 119:3,5 119:8,9,15,16,22 124:14 130:11 134:3,14 139:14 141:10,10,18 149:4 154:24 161:17 164:6,14 170:4 174:7,9 176:11 179:14 181:21 183:13 184:8,12 186:8 189:4 190:13 195:25 208:21 210:19 211:22 215:4 218:15 221:19 229:11,11 236:19 242:2 243:17 247:12 253:7 264:2 270:19 271:7 273:20	timeframe 40:11 73:2 88:23 124:15 173:19 177:6 191:11 times 15:22 40:2 61:2,3,4 80:22 99:20 109:22 118:1,7 129:16 150:19 188:21,25 191:8 230:3 tired 220:5 title 109:7 titled 81:18 85:22 162:2 today 15:17,20 16:18 17:11 18:4 18:18,20 19:5,15 24:3,21 68:10 77:8 93:7 95:22 95:23 97:3,9,21 107:15 111:7 124:23 125:9 126:5 127:23 128:12,19 129:16 132:11 149:13 174:25 177:22 179:2 186:20 189:13 198:22 216:2 236:19 252:17 270:18,19 today's 14:2 told 78:24 87:23 106:4 132:11 160:4 203:24 top 95:2 125:19 264:15 total 56:23 119:15 137:6,7 totally 59:14 77:3 136:8 145:7
--	--	--	--

tough 38:3 track 41:4 67:18 118:15 119:2,15 119:22 121:10 122:24 tracked 65:15 67:13 121:19 tracking 67:22 tracks 123:20 tragically 130:6 trained 193:22 training 210:14,21 210:23,25 211:5 211:12 transcribed 273:16 276:7 transcript 4:1 235:15 272:3,6,9 272:11 275:11,12 276:5,12 277:5,11 277:17 transcription 273:17 transcripts 25:14 transitioned 241:1 treat 38:6 121:8 121:11 147:18 187:8 190:3 191:5 201:23 207:14 treatable 147:10 147:17 treated 35:16 201:14 227:21,23 229:2 treatment 21:21 29:8 47:11 49:11 49:21 57:13 89:22 104:8,11,12,12 105:12 106:23 115:20 116:25 126:15 128:5	132:8,23 133:8,15 134:7 145:15 147:23 162:17 190:14,23 191:15 199:15 225:10 227:15,20 228:12 229:18 248:8 259:4,24 trend 67:3 242:10 246:20,23 253:6 trending 241:10 241:19,21,25 242:5 trends 46:8,19 47:1,19 48:6 49:2 50:4 64:17 66:25 77:10,13,15 78:9 78:10 89:6,10 90:16 103:16 105:23 141:12 151:25 163:8 168:17 171:11 172:24 173:15,16 180:21 181:3,16 199:6,25 200:2 244:24 245:4,6,14 245:15,20,21 246:14 tricky 69:19 tried 69:5 87:8 148:25 166:11 196:15,16 226:12 tries 179:12 true 38:16 58:18 62:16 67:23 128:12,25 156:23 173:6 179:3 198:3 219:6 230:17 233:18,24 234:4 235:25 273:16	truly 155:14 truth 273:11,11,12 truthful 19:1 truthfully 18:21 try 16:20,24 81:5 90:15,21 101:15 122:24 152:8 153:23 155:25 161:18 172:22 173:2,14 194:18 195:3 197:7,18 198:9,12 221:18 227:15 228:15 trying 46:6,17 63:8 80:25 82:6 82:25 87:13 89:12 89:20 109:4 113:1 130:17 134:3 138:17 150:16 152:24 192:3 195:25 196:12 198:16 200:5,5 221:16 259:15 tsunami 231:2 232:19 tucker 2:14 14:14 tuckerellis.com 2:16 tuesday 75:8 turn 70:2 81:6 85:6 102:16 125:11 156:21,24 182:12 203:25 205:8 232:17 turning 38:22 229:18 turns 16:23 tv 6:20 96:16,20 204:15 234:12,22 twelfth 2:10	twice 31:16 two 16:4 21:25 22:17,25 31:4 34:3 38:19 40:4 43:21 47:22,23 54:14 80:19 104:11 106:11 112:1 113:16 134:12 135:25 145:18 158:4 197:10 201:17 209:3 218:2,4 219:14 237:8 246:6 265:3 twofold 84:25 type 35:15 216:10 typing 129:7
u			
u 33:2,4 135:9 uh 16:15 28:6,17 37:11 53:18 58:9 76:2 80:24 95:5 95:10 103:6 126:11 130:9,23 132:2 134:25 138:2 139:5 143:1 169:12 179:10 180:23 185:17 210:17 211:20 215:17 217:20 225:6 231:17 234:24 237:11,22 238:22 244:7 ultimately 191:17 umbrella 41:9 165:4 underlying 61:16 62:17 underneath 162:7 understand 18:7 18:10,17 19:12			

20:5 26:8 28:21 31:17 41:7 46:6 46:10,17 48:2 54:5 58:3 62:21 63:9 67:11 76:17 87:8 88:6,13 89:15 90:7,15,22 93:3 107:11 113:15 114:13 116:21,22 117:11 118:18 145:19 147:9,16 149:10 155:25 170:2 172:22 173:3,14 196:6,8,15 197:12 199:8,24 200:1,6 202:3 203:1 216:24 221:16 226:12 228:14 238:12 251:17 255:4,6 261:15 262:20,21,23 264:3 understanding 19:3,6,14 51:18 52:16 62:15 63:9 64:21 76:11 84:4 86:6,11,17 88:2 91:2 93:24 95:18 97:1 99:2 100:2 101:25 116:7,17 118:12 120:2 145:23 154:16 165:6 187:11,25 189:8 190:7,9,11 204:13 206:15,17 206:22 212:20 219:1 225:23 226:6 242:8 250:6 254:6,10,24 256:22 258:4	262:16 266:17 understood 18:1 90:1 91:16 97:2 107:8 242:12 246:12 undertake 89:9 172:22 173:2 undertaken 155:25 156:7 161:18 undertook 90:21 undertreated 189:5 unfair 52:2 unfortunately 78:17 92:12 179:1 224:21 unique 170:20,25 171:6,9 unit 115:21 120:21 120:24 121:11 united 1:1 86:19 193:5 256:19 257:1,22 258:12 258:16 263:13 267:2 units 120:16 university 26:12 26:16 54:10 76:9 unnumbered 224:22 unreasonable 215:3,5 unruly 35:14 unusual 66:7,9 137:8,9 update 5:7 6:6 54:25 177:14 updates 6:9 182:2 urban 26:16	use 20:25 49:11 52:25 59:7 62:6 62:18 63:2 64:20 64:24 77:12 85:1 91:25 94:4 95:3 98:20 99:4 100:4 100:21 110:12 116:1 118:7 121:12,13 123:8 124:1 127:17 128:9,20 152:14 153:15,16 156:2 186:12 187:1,14 189:10 191:5,15 192:7 209:1 211:1 211:6,6,13 212:9 213:11,22,23,24 213:25 214:3,13 215:23 216:6 226:10 233:7 237:1 240:3,8,25 241:2 253:22 254:10 255:3 260:15 263:1,12 user 212:14 users 216:14 229:11,12 231:23 uses 91:15 99:20 111:9 153:24 255:12 usually 51:10 utilization 212:19 232:11 v v 1:13 2:19 275:6 276:3 277:3 vacuum 189:1 vaguely 56:4 valeria 129:24 valid 268:9 269:4	valuable 109:17 value 193:21,23 varies 118:9 various 32:14 56:24 75:21,24 92:2 109:16 110:6 126:8 138:6 140:1 140:4 197:5,16 233:13 244:4 vehicle 67:8 veritext 275:1,7 278:1 veritext.com. 275:17 versa 61:5 version 142:23 versus 44:16,17,18 57:22 80:6 112:24 121:12,21 147:23 227:20 229:18 vice 61:5 vicodin 179:20 video 8:1 videographer 3:24 14:1 53:23 54:1 59:4 107:24 108:10 160:18 161:5 235:7,10 263:6,10 265:21 265:24 271:8 videotaped 1:18 view 51:17 151:24 157:4 191:13 210:20 230:10 vinton 80:21 visits 179:23 180:12 vitae 27:16 vital 189:24 190:23 191:16 207:14 259:5,24
--	--	--	---

voice 221:21	241:14 249:12	week 32:4 212:24	235:21 236:3
volume 214:4	252:17 253:24	weeks 135:25	273:9,14,15,18
262:2	257:7 260:13	welcome 54:3	274:5 275:8,11
volunteer 29:11	wanted 16:5 28:1	81:17 108:12	276:1,4,11 277:1,4
vote 158:22,25	31:11 47:13 52:24	161:7,9 162:7	277:15
159:3,14 160:1	53:2,3 64:7 70:5	236:21 266:1	witness's 272:2
voted 159:22	70:25 89:22	welcomes 131:22	witness' 275:14
votes 159:4,21	110:12 130:15	wendy 1:24 273:6	woman 159:23
160:2	224:16 235:13,20	274:14	won 37:15
w	wants 172:13	went 15:14 48:4	wonder 217:10
wait 16:24 17:1,4	washington 2:10	48:19 49:6 57:6	wonderful 54:17
125:3 129:5	2:20 3:11	58:22 65:3,5 66:4	word 169:19
140:17 201:1	wasting 60:11	66:6 72:18,18	253:11 264:9,14
231:9 257:14,14	way 17:5,18 41:11	73:23,24 77:23,25	words 20:25 56:6
259:11	45:17 61:1,19	83:15,16 103:12	187:15 194:14
waiting 49:19	66:10 73:19 76:17	104:1 105:2,21	201:17 218:11
123:10 129:8,11	78:19 84:3 109:20	106:25 107:16	251:6
227:15	111:19 122:23	136:7 149:4,20	work 16:18 18:11
waived 275:19	123:4,7 125:14	235:14	23:20 26:5 50:22
wal 2:18	128:7 146:15,16	west 3:16 34:18	62:13 70:7 71:2
walmart 2:17	151:13 152:4	western 70:15	71:19,23 87:10
14:17	161:24 163:2	whawkins 2:12	130:10 151:13,13
walter 142:18	176:20 182:21	whereof 274:5	171:25 172:13
143:4 174:24	183:22 188:1,20	white 117:21	173:10 175:16
182:10,13	200:10 201:12,19	178:15,22	183:15
want 17:1 48:1	205:14 211:7	wholesale 266:22	worked 138:16
58:25 78:15 81:12	212:4,6,19 218:11	267:1,4	209:25
84:1 90:2 94:23	220:9 221:4	william 1:19 4:7	workers 224:5
97:15 107:9,9	226:11,16 228:12	14:12 15:4,9	workhouse 30:23
114:25 119:18	228:20 229:1	269:10 273:9	30:24,25
133:22 142:16	231:25 232:4	275:8 276:4,9	working 71:25
145:4 152:19	241:6 249:19	277:4,13 278:20	89:8 189:16
153:13 160:16	257:9,11,17 259:7	williams 2:8 14:11	210:20 212:3,4
162:4 170:14	259:13 267:6	win 37:20	218:5,7
179:4 184:24	ways 43:21 148:19	wish 54:7 87:5	works 75:6 199:22
185:18 196:18	207:15 215:1	89:11 148:21,23	world 179:2
198:20 209:13	216:10 232:3	152:21 193:19	222:15 229:10
212:10 217:24	wc.com 2:11,12	wishes 18:4	worrisome 77:10
218:22 220:14	we've 53:19	witness 2:3 14:9	77:15 78:10 89:5
228:6 230:24	weakening 155:14	81:14,16 83:2	90:16 171:11
232:5 237:12	155:20	185:10,13 201:3	172:24

[worth - zipp]

Page 48

worth 152:23	118:4,9,11 124:9
write 118:19	132:12 139:21,24
219:15 249:25	158:23,24 159:11
261:10,18 262:22	223:21 258:17
writes 131:19	years 20:7 29:14
217:6	30:6,15 31:24
writing 17:8	33:24 35:5,5 39:2
209:18 219:8	40:4 41:22 43:14
written 17:21	47:21,22,24 54:14
25:19 167:5	62:14,21 65:19,20
171:10 266:5	65:24 67:16 68:14
wrong 222:17,18	77:25 88:24,25
wrote 262:24	103:21,24 105:8
ws 250:7	105:14 123:17
wv 3:5	129:1 146:21
y	163:22 165:25
yeah 23:23 36:11	174:8 187:22
42:4,4,4 45:25	227:6 229:14
73:13 79:3 81:15	230:2 241:9,13,20
88:9 89:3 104:12	241:22 244:5
104:25 105:19	245:5 263:17
133:21 135:6	yep 80:1 82:5
136:3,3 140:18	yesterday 24:8,12
144:16 145:5	24:18 131:20
149:19,23 154:12	york 2:5 3:17
155:2,16 167:21	yvonne 51:24
169:14 178:11	143:18 222:8,9,10
179:2 182:24	222:11
194:23 196:25	z
198:7 199:11	zeno 3:16 15:1
203:16 216:16	zeno.houston 3:18
217:15 218:25	zero 246:22
227:12 232:9,15	zeroed 84:13
249:9 261:2	zipp 3:9 14:24,24
264:13,25	270:25,25
year 39:5,11 41:25	
42:1 65:24 66:23	
67:10 72:5,7,8	
73:5 78:3 88:19	
88:22 105:16	
106:3,12 117:23	

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

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